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HOMELESS CHILDREN: ARE WE LOSING A GENERATION?

HEARING

BEFORE THE

SUBCOMMITTEE ON CHILDREN, FAMILY, DRUGS AND ALCOHOLISM

OF THE

COMMITTEE ON LABOR AND HUMAN RESOURCES
UNITED STATES SENATE

ONE HUNDRED FIRST CONGRESS

FIRST SESSION

ON

EXAMINING THE HOMELESS SITUATION OF CHILDREN

OCTOBER 4, 1989

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HOMELESS CHILDREN: ARE WE LOSING A GENERATION?

WEDNESDAY, OCTOBER 4, 1989

U.S. SENATE,
SUBCOMMITTEE ON CHILDREN, FAMILY,
DRUGS AND ALCOHOLISM,
OF THE COMMITTEE ON LABOR AND HUMAN RESOURCES,
Washington, DC.

The subcommittee met, pursuant to notice, at 1:12 p.m., in room SD-430, Dirksen Senate Office Building, Senator Christopher J. Dodd (chairman of the subcommittee) presiding.

Present: Senators Dodd and Metzenbaum.

Also Present: Senators Rockefeller and Fowler.

OPENING STATEMENT OF SENATOR DODD

Senator DODD. The Subcommittee on Children, Family, Drugs and Alcoholism will come to order. Let me welcome all of you here this afternoon for our hearing on "Homeless Children: Present Needs and Future Costs".

I would like to take just a couple of minutes, if I can, to share with you some of my own thoughts on this issue before we invite members of our panels to come before the subcommittee. I welcome all of you.

This is an overlooked but vitally important issue, I would say at the outset. This afternoon, the Subcommittee on Children, Family, Drugs and Alcoholism will explore the implications and consequences of childhood disenfranchisement for both homeless children and for society as a whole.

Even as homelessness in America rises on our national agenda, thanks to the ceaseless efforts of hundreds of voluntary organizations and Housing Now, the special circumstances and needs of homeless children remain largely unappreciated. Nor are we fully aware of the future costs should a lost generation of homeless children age but fail to mature into adulthood.

We simply know, as the Institute of Medicine has reported, that on any given night in this country, 100,000 American children go to bed without a place that they call home. In my home State of Connecticut, children represent 65 percent of the homeless in affluent Fairfield County. Part of the problem is that the issue of homeless children overlaps with other high-profile calamities affecting our country. Indeed, some children are homeless because they are born HIV-positive. Others are born to drug-addicted mothers, and

some result in teenage pregnancy and are part of the inner city underclass.

All this might help us believe that homeless children are somehow different, the result of some other illness or plague. But this would be a misconception, and by blaming AIDS or crack or hardcore poverty, we deny that homeless among children is itself an issue. But it is the issue. The fact is that the great majority of homeless children have no mental or physical disability. The fastest growing subgroup among homeless Americans is the family. There are more similarities than differences between homeless children and the other children with whom they go to school. Their families are often working, but simply not making enough. Homeless children and families are no more at fault than refugees who are dislocated by war, civil strife or natural catastrophe. They ought not to be blamed for their predicament.

And the issue goes beyond homelessness because for children in particular, it is more than a home that is missing. They lack health care, stability, security, privacy, joy, dignity—the very necessary substrates for a normal childhood. And without a normal childhood, there will likely be no normal adulthood.

The pioneering work of Eric Erickson has defined the necessary stages of human development. Each level of maturation must be sequentially mastered, but it takes a secure environment, opportunities to succeed, and emotional support. The hidden tragedy for homeless children is the derailment of their personal growth. These losses, as opposed to the loss of a home, may be irrevocable. Timing is critical in childhood. A person who never knew confidence or self-respect as a child is unlikely to achieve it as an adult.

The predicament of many American children parallels those of refugees in the Third World, dislocated, destitute and victimized. The irony is that the refugee child may be better cared for and looked after than those in our own cities.

I think my colleagues will agree that our hearings often approach problems from the point of view of existing programs or agencies. What I hope that the subcommittee will accomplish today, however, is to consider the child and the effects of homelessness, rather than which department ought to do what, or how well any particular program is working.

This subcommittee and its staff have assembled leading experts in childhood health, development and education, along with people who have worked with homeless children and their families. I look forward to hearing, too, from the children and adolescents who have lived homeless. Before we can solve this problem, we certainly need to understand it, and that is what we hope to accomplish today.

Next year, the McKinney Act, the single most important piece of legislation addressing homelessness, is due for reauthorization. It is noteworthy that with the exception of provisions related to education, this act contains no language or provisions specific for children—a critical albeit unintended lapse. This hearing will permit us all to know better.

I would like to thank our witnesses today for participating and providing us with this important information. We have a unique

opportunity to give a composite, expert portrait of these children at risk.

Milton once wrote that "Childhood shows the man as the morning shows the day." Thanks to the help of our witnesses today and many other people who have been involved in this issue, perhaps we can find a way.

I would like to invite our first panel to approach the witness table. It consists of a well-known American who has taken valuable time and committed personal efforts and resources to this issue, and we are truly honored that you could be with us in Washington today. I would like to welcome to this subcommittee Jon Voight, a very well-known American actor.

Jon, we understand you have a couple of folks who are with you today who will be joining you.

Ms. McCALL. I would like to introduce Bernice Price, Calvin and Charlene.

Senator DODD. How are you today, Bernice?

BERNICE. Fine.

Ms. McCALL. This is Calvin, and this is Charlene.

Senator DODD. Welcome. How are you, Charlene? Can you say hello?

CHARLENE. Hello.

Senator DODD. Come on up and sit down.

Jon, we thank you for bringing these distinguished witnesses with you.

Mr. VOIGHT. And Ella McCall is the woman behind us here, who is quite an expert, and I'd love to have her sit with us, too.

Senator DODD. Ella, come on up as well.

STATEMENTS OF JON VOIGHT, ACTOR, ACCOMPANIED BY ELLA McCALL, SOCIAL WORKER, CAPITAL CITY INN AND WASHINGTON & WASHINGTON; AND BERNICE, CHARLENE, AND CALVIN, HOMELESS CHILDREN, WASHINGTON, DC, AND LORIN, PREVIOUSLY A HOMELESS MOTHER, ATLANTA, GA

Mr. VOIGHT. I have to say that Calvin, I haven't met but by his reputation; I have been introduced to him as a fine young fellow who has successfully survived all of the dangers in growing up in a system that surrounds the homeless. And these two other children were just in a play called "Beauty and the Beast: Voices from the Streets", and I was fortunate enough to see these children perform in a film made on that piece. So I am familiar with the beauty of these children.

I would like to start off by reading a statement which I have composed. I first of all want to just thank you for inviting me and for sharing this hearing with my friends and me. And just for your caring, Chris, and for those people surrounding this little hearing, we are all here for the sake of the most holy of purposes, this idea that we can reach out and do something to help this new generation of children.

I have just been given by Ella McCall, who has spent so many years of her life helping children and has spent much time at Cap City, where these two kids have come from—and I was there yesterday; I spent a lot of time with some children and their Moms

and Dads—she just gave me this t-shirt that says, "Love the Babies—I am a Friend of Homeless Children". And I can't think of any t-shirt or any garment that I could wear that would make me more proud, so I will treasure this and wear it often.

I'll start off by saying this little piece which I have composed, which takes the form of a little poetry perhaps, too, and then I'd love you to ask the children the questions because they really are the experts and perhaps the most eloquent voices we can listen to.

The children are our future, no matter if we live on or not to see that day that they run the earth's plans. We as God-like figures of his idea that is good and continuous must be the ones to plant the seeds for their continuous growth, to play their part of life in their way, for the future prognosis of eternity of evolution.

How do we give them this ability or this start? Do we help them make a better world, or do we say it makes no difference to us—we won't be here anyway?

Well, I think it makes a big difference to us, because many of them come from our loins, and many of them are the mirror of what we projected here, of what we created in some way for them.

We are all part of the good and the evil. In some ways, we have contributed to the pollution. And so there is no man free from the responsibility of making sure to calm and cuddle the newborns.

The children of our children can and must be a new frontier for future recreation and future administration for all loving things of life. And we must all long for the day that we see our immortality through their continuous chance to be better than we have been.

They are our monuments of life's learnings, life's lessons, that we may not have been perfect in, but we can set aside now some new energies, some new thoughts of how to succeed in bringing them a better future than is facing them now.

Does it mean passing new bills of legislation for better and cheaper housing?

Does it mean we must contact the American people, the industrialists, the multitude of successful entrepreneurs, who can come together and form money pools that can find different ways to bring shelter and education to the poor?

We can see as an example many large companies are in this effort now. A list is available, who they are and what they are accomplishing. They are setting perfect examples now of what perhaps we need much more of.

We are all looking for perfect answers that can help heal a Nation of want. We are a great Nation, and we can find the answers. We need only to want to do so. What better a solution than the American Government and its perfect example of democracy, which is free enterprise coming together to form a new resolution to fund our children's growth, for their perfect survival, for success, for our future on earth.

May God hear this resolution, and may he grant us the will and the ability to complete it.

There has been a book recently, Senator, that I'd like to recommend, which is a book called "American Renaissance". It gives many examples of people from our community who have come together. I'd like to just mention a couple so that you would understand the context of that book and its focus.

There is, of course, a group that perhaps we have all heard of, the "I Have A Dream" Foundation, which has brought together many caring people, which was started by Eugene Laing. He has put up the money for people who had some talent from the age of maybe 6 years old and followed these young people through and given them support and help. This very successful fellow has left his phones open for these young children to call him at any time of the day or night, and has had a great influences on their lives, and paid attention to their families and their circumstances while growing. They have had a tremendous record.

And there is something called "Lawndale" in Chicago, where local corporations have set up a tuition-free community school for ages 2 to 8, and it has these aspects to it: (1) individualized instruction; (2) a year-around program; (3) ready access to computers; (4) class limit of 25; (5) teaching methods tailored to the needs of individual students; (6) no set grades, each student advancing at his or her own rate, and (7) involving the parents in all parts of this program.

So there are many, many different parts of our communities that are coming forward to answer these problems and to provide loving energy so that these young ones may grow in the proper spirit.

So I would like to just recommend that book and suggest that there are perhaps other places where wonderful examples have been set from our communities.

Thank you very much for this, for your time.

Senator DODD. Thank you, Jon, and that is a good recommendation as well. I again want to just tell us how much it means to have someone like yourself get involved in this and care as much about it as you do. You have friends who work in this as well. Paul Simon—not our colleague Paul Simon—I will tell you just as an aside, last week Paul Simon, the artist, performed at a dinner here in Washington. And maybe only in Washington did the notice have to say "Paul Simon, the composer/singer"—only in Washington would they assume that Paul Simon, the Senator, was going to sing here. But he has done terrific work in this area as well, and frankly, had hoped to be with us today but could not make it.

As you know, he contributes to the mobile medical units in New York, which he has personally raised the revenues for and helped put together to serve children and their medical needs. And last evening my colleague from West Virginia, Jay Rockefeller, Orrin Hatch and I introduced legislation to fund more model mobile units to serve homeless children and their medical needs. This will be a pilot program, and we are also going to offer the legislation as well as a free-standing proposition. But it is now a part of the Omnibus drug bill which was adopted last night. With all the multi billions of dollars that are being talked about in the drug effort, this hardly shows up on the Richter scale, but it may mean a tremendous amount to young people who need to have basic medical care. It gets lost sometimes in the big-ticket items, but we think it is something that will be worthwhile. So again, we thank you.

I have been joined here by two colleagues who hardly need introduction when it comes to the issues of children and caring about people. Howard Metzenbaum of Ohio has had a long record of being involved in these issues, and my colleague, Jay Rockefeller.

He and I share the common experience of having worked in the Peace Corps together back a couple of years ago—we don't like to admit how long ago now—and of course, his work with the VISTA and ACTION programs in West Virginia are well-known.

I am happy that both of you are here. Do you have some opening remarks or comments you'd like to make, Jay?

Senator ROCKEFELLER. Mr. Chairman, I didn't come to talk, but to learn, and will stay to do so. As you indicated, I went to West Virginia as a VISTA volunteer, having no idea that I would end up in public life, but went into a community—you and I have talked about it before—where I saw the problems back in the early Sixties that children have in Appalachia and that they still have in Appalachia, and they are many.

I am also the Chairman of the National Commission on Children, which is a group of 36 very good people who really know their stuff on children. We are a creature of the Congress and the Presidency. We are going to come back in March of 1991 to give to the Congress and to the President policy recommendations on children. In a meeting we had last week in Chicago, we went to the Cook County General Hospital, where we went into the intensive care unit for premature babies, and we saw children who were one and a half pounds, children who were two pounds, children who were three pounds, children who were 4 pounds at birth looked pretty good compared to the others. Probably all of those who survived the experience of going through that intensive care will come out with some basic developmental disabilities, physical and/or intellectually. That is heart-rending. And then you think of the stupidity, not only the callousness, of this Nation—one-fourth of our children are poor in West Virginia, one-fifth of our children are poor in America—but you think how silly that is, too, how stupid it is, as well as how cruel it is.

It will cost the taxpayers, $50,000, $100,000—it gets up to $200,000 to $300,000—to be in that intensive care unit. And if we could somehow reach the parents, it would cost them $400 to take care of themselves on a prenatal basis—and we don't make that effort. Children get lost. As you said, in the bill that was passed last night, I think that frankly there is hypocrisy in this Nation about children. We constantly talk about loving them—we think of the warm glow of love that we have for children, but we do precious little for them. And the National Commission on Children is tired of that—the chairman of this subcommittee is tired of that.

And I know there is no money left, and I know that we are going to vote in a ridiculous capital gains reduction—we will do it here in the Senate just like they did in the House—we won't pass a catastrophic bill. We cannot be crazy about our children, Mr. Chairman, and that is said on human grounds, that is said on moral grounds, that is said on budget grounds, that is said on American grounds.

I join today your demonstration bill. You have done so much in so many ways, but is so much to do, and it is terrifying, and time is running out. Essentially, we are losing a generation. I suppose that is my statement. We are losing a generation, and we the American people, we the American public sector, are part of losing that generation, and that is not very good.

Senator DODD. Thank you very much, Senator Rockefeller.

Senator Metzenbaum.

Senator METZENBAUM. Mr. Chairman, first let me congratulate you on holding this hearing. I can't think of any more timely subject, and I doff my hat to you and am happy to sit with you in this hearing.

Second, Mr. Chairman, I ask unanimous consent that a written statement I have be included in the record.

Senator DODD. Without objection, so ordered.

[The prepared statement of Senator Metzenbaum and Senator Rockefeller follows:]

PREPARED STATEMENT OF SENATOR METZENBAUM

Senator Metzenbaum. Homelessness in the United States today is a national disgrace. Most estimates place the number of homeless at 3 million Americans. One out of every four homeless persons is a child.

There is no parallel in the developed world. No other Western country neglects its citizens in so fundamental a way—denying even the most basic shelter for 3 million of its own people.

The fact is—there is broad public support for an aggressive housing production program to house the homeless and to halt the increase in homelessness.

In a recent media general/Associated Press poll, 68 percent of the respondents rated homelessness as a "very serious" national problem.

Sixty-two percent favored more Federal spending to provide the homeless with housing. The message is clear—Americans want to do something about the problem of homelessness, and they are willing to pay for it.

We should be able to set aside funds to modernize public housing so that families now living in welfare hotels have a permanent place to live.

The District of Columbia currently pays the owner of the notorious Capital City Inn $1,400 per month for every homeless family living there—$1,400 per month. That is equivalent to the average monthly mortgage payment on a median priced home in the Washington area.

Last week, the director of a very successful transitional homeless program, here in Washington, called the "Green Door", testified before this committee. She said that it cost about $500 to $700 per month to house and to provide a social support network for homeless individuals in her program.

The Green Door is taking people off the streets, and getting them back into jobs, and participating in society. The Capital City Inn is just a squalid dumping ground, hardly fit for human habitation—at three times the cost.

Four months ago, I and Senators Gore, Bumpers, Simon, Pell and Inouye introduced the Permanent Housing For Homeless Americans Act, a bill that attacks what every major study has defined as the primary cause of homelessness—the lack of decent, affordable housing.

The bill we introduced would increase the supply of Federally-assisted housing by 140,000 units in each of the next two years, and reserve those units for the homeless and for people in imminent danger of becoming homeless.

That bill, S. 1034, is currently pending in the Banking Committee. The Banking Committee has been holding hearings all summer on a new housing reauthorization bill, S. 566, The National Affordable Housing Act.

But the fact is—that bill is sorely lacking—it does not do anywhere near enough for homeless people. It would provide $300 million for homeless programs—out of $15 billion—2 percent of the total. If we can find $1.1 billion, on the spur of the moment, to help people made homeless by Hurricane Hugo, we certainly should be able to find the funding to help the 3 million homeless in this country.

PREPARED STATEMENT OF SENATOR JOHN D. ROCKEFELLER IV

Senator Rockefeller. I am grateful to be able to join you, Mr. Chairman (Senator Dodd), and everyone in this room. I don't want to take very much time, because we should spend our time listening to, learning from, being further motivated by the witnesses here today—each of whom have an important message and important information that Congress ought to draw on with utter seriousness.

And I might say to the witnesses, you are presenting testimony to a chairman, Senator Dodd, and a subcommittee, that will indeed hear every word you utter. From the day I joined the Senate almost 5 years ago, I have seen Senator Dodd persist and persist in his efforts to respond to the many problems affecting our Nation's children. He created a special caucus on children in the Senate, and has used that forum creatively and aggressively to call attention to problems like the tragic set we are addressing today—children who are homeless—and to demand constructive action. And now he chairs this subcommittee, and with all of the members who serve on it, has devised a range of constructive, admirable legislation on behalf of children, especially those who are suffering the most.

Early this year, I was granted the honor of being elected chairman of a new, ambitious endeavor to also focus attention on the problems and concerns of our country's children. With a field hearing in Chicago last week, the National Commission on Children launched its public work, and we are now vigorously pursuing our ambitious mission. We are charged with conducting a thorough, comprehensive assessment of the status of our country's children, and more importantly, with providing major recommendations to Congress and the President by March of 1991. We want to lay out the steps and strategies that we conclude are most vital to responding to the needs of our children and our country's future.

I am utterly determined that this Commission reach the Nation's conscience and enter its soul. We need to take full advantage of our opportunity to call on our country to admit just how much we are short-shifting our children, failing to care properly for so many, and denying the consequences of our current failures in terms of tomorrow's workforce, economy, and social fabric.

So, Mr. Chairman, I pledge to work closely with you and your subcommittee. The National Commission on Children will pore through your hearing records, including today's, and draw widely on what you have learned.

And I feel great anguish and sorrow about the issues that we are considering today. This hearing's topic looks at one of the saddest corners in the lives of America's children. this afternoon, we will peer into the conditions and needs of those children who have no permanent home, whose families are desperately seeking stable shelter, and who are plagued by all of the problems that accompany homelessness.

I personally know of the valiant and dedicated work of Paul Simon and Dr. Redlener in New York City, and applaud them publicly here again today. And I genuinely look forward to hearing—or reading—the words and wisdom of the rest of today's distinguished and committed witnesses.

Senator METZENBAUM. I would feel a little bit embarrassed about making this entire statement. I see these children waiting at the witness table—I think one young lady is almost getting ready to fall asleep, and I'm sure she is getting bored hearing all these politicians speak—and I can understand that. And the other young lady, I think we owe some special consideration because the microphone is too high for her, and we can hardly see her face, and we'll have to work out something for her. And I am happy to see that young man is over there.

Frankly, Mr. Chairman, I think this is a great opportunity to hear these children express themselves and to hear Jon Voight express himself, so I will say nothing further.

Senator DODD. Thank you very much, Senator Metzenbaum.

Senator Fowler of Georgia, who is not a member of our committee, but always a welcome member, particularly when issues come up affecting children.

Senator FOWLER. Well, in light of the uncharacteristic brevity of my friend from Ohio, I will make my commendations to you, Mr. Chairman, and to the extraordinarily fine remarks of Senator Rockefeller, by simply remembering the story of Eliza Doolittle in *Pygmalion*, made into the popular play and musical, "My Fair Lady".

You will remember the old Professor Henry Higgins has a bet that he can make a lady out of the homeless street urchin Eliza

Doolittle, and he tries and tries, and he practices and practices, but he just can't get through. And finally, in the most memorable scene at least to me, he is simply trying to teach her some manners—which fork to use and which knife to use at the dinner table—but in increasing frustration, he throws down his books, and he looks at young Eliza, and he says, "The great secret in life, dear Eliza, is not whether you have good manners or bad manners, but the same manner toward all people; to act as though you are already in heaven, where there are no second-class citizens, and one soul is as good as another."

Our treatment of children, in the fine words of Senator Rockefeller, has already relegated them to second-class citizenship in many, many times and cases, and that should not be tolerable in a free and democratic society.

Mr. Chairman, on one of your panels, Dr. Nancy Boxhill will testify. I cannot see her—I do not have my glasses; that's why I quote poetry from memory——

Senator DODD. Well, there is no one here to challenge you on Eliza Doolittle. [Laughter.]

Senator FOWLER [continuing]. But I did want to introduce her formally to you. She is a Fulton County Commissioner. Her credentials are very well-known as a psychologist and a sociologist, and she has been working on these problems long before they became the national crisis they are today.

I am delighted to have her as my constituent, but more importantly as someone who should be listened to because she has worked in this field for many, many years and will have some very good suggestions for the committee.

I thank the chairman.

Senator DODD. Thank you very much, Senator Fowler.

For the information of the people in our audience and my colleagues, the photographs we see here as part of these panels—and I hope you will get a chance to see some of them before you leave—are done by photographer Jim Hubbard, of homeless children and families. He runs the Children of Hope Media Center in the District of Columbia. On one side of the panels are photos which Jim has taken, and on the other side are photos taken by the children themselves, under his direction. You will see what a wonderful eye Jim has, but with all due respect to Jim, I think even he appreciates tremendously the natural native eye of someone who sees things as life really is, unfortunately, in many cases.

Jim, why don't you stand up so my colleagues and the audience knows who you are? We thank you for making this a part of this hearing today as well.

Again, I thank my colleagues for being here. I would say to my good friend Jay Rockefeller from West Virginia how right he is—I am embarrassed to share with my colleagues the fact that I come from the wealthiest State in America on a per capita basis. I say I am embarrassed because in that context, as proud as we are of the fact that we have provided a standard of living unequal to any other State in this country on a per capita basis, the cities of Hartford and New Haven, CT, are rated fourth and seventh, respectively, among the poorest cities in the United States. So in the midst of the greatest affluence exists some of the worst poverty. And on the

streets of those cities, almost every other child you see in the streets of those cities is growing up in poverty.

It is something that I wish more people took cognizance of, that as rich as we are as a State, we are suffering because a significant number of our citizens, particularly those who will inherit the responsibility of leading it, are growing up totally ill-prepared as a result of their status of poverty to meet the challenges of the next century which they will be asked to lead at its inception.

So I feel very strongly about this issue. There are a lot of things we can talk about, but to me there is no other single subject before this Congress or before this Nation that is as profound and as significant as how we treat our children and what happens to them. Every other issue is resolvable or irresolvable depending upon the ability of the next generation to cope with it. And if we fail to provide them with the tools, then all the bright ideas mean nothing—sustaining a democracy will mean nothing if a generation is not equipped or prepared to understand how it should work and how it needs to be practiced.

So to me this is sort of essential, and the fact that the fastest-growing percentage of homeless people in this country are families, of course, children included, is something we have got to try and turn around.

Now, we've got some very distinguished witnesses who came with Jon here today—first of all, Calvin, and over here we have Bernice and Charlene.

We are so thrilled that you have come here today as our three first witnesses. Bernice, you look like you've got something you would like to share with us. Would you like to take just a couple of minutes and share with us about what it has been like for you to grow up in a situation where having a home of your own or a place you can call your own—what that means to you?

BERNICE. It means you live in an environment where there are a lot of drugs, and people driving cars, all crazy, and kids out there can get hit; people getting kids to sell drugs; shooting. There is a lot of stuff going on there that kids shouldn't be around, seeing.

Senator DODD. And Charlene, do you have anything you'd like to share with us about that as well? [Pause.]

You want to keep quiet for a minute, okay.

Calvin, how about you? What do you like to do best? What is your favorite activity?

CALVIN. My favorite activity—I have to say it would be taking pictures, photography. That is my new hobby that I just picked up, and I've been doing it for some time now, since last year.

Senator DODD. And these are some of your pictures over here?

CALVIN. Yes.

Senator DODD. That's terrific. We'll take a look at those in a minute.

CALVIN. Thank you.

Senator DODD. Just share with us, Calvin, in your own words, if you would, what it has meant to you, what it is like. You know other children, I'm sure, who are growing up in the homeless situation. What is it like for them?

CALVIN. For them, I'd say that some of them feel real depressed, and the feeling that they have is because of where they live. They

don't have many friends and no place to really call home, and they're always getting shipped from one place to another. And when they go to school, some say that they have been teased, things like that.

Senator DODD. It is hard to maintain consistent friends all the time because you move around a lot.

CALVIN. Yes, that's pretty much true.

Senator DODD. How about your relationship with your parents or your brothers and sisters; do you have brothers and sisters?

CALVIN. Yes. I have one brother.

Senator DODD. And how does that affect your relationship with your brother or other members of the family?

CALVIN. I believe the way it affects us is that it makes us grow stronger as a family, to try to stay together all the time and isolate yourselves from the bad crowd and just pray and stay together.

Senator DODD. Well, I am glad to hear that there is a silver lining in all of that. It is important.

How about you, Bernice, what is your favorite activity? What do you like to do the most—well, maybe a number of things—what are the three or four things you love to do the most, not just the one thing?

BERNICE. I liked the play I was in. That was one of the activities.

Senator FOWLER. What was the name of the play?

BERNICE. "Beauty and the Beast".

Senator FOWLER. Were you the beauty or the beast?

BERNICE. I was the beauty.

Senator FOWLER. We can tell why.

BERNICE. Another activity that we did a few days after the play was a couple kids from the "Beauty and the Beast" play went to a camp in Mississippi called Piney Woods.

Senator DODD. Was that fun?

BERNICE. Yes. Ms. Cathy Hughes from WOL has sent kids from some other States, including us, to Mississippi for the camp, so we won't have to be around the drugs and stuff that are happening at Capital City Inn.

Senator DODD. That seems to worry you the most, the drugs and the problems like that around you. Have you seen a lot of that?

BERNICE. Yes.

Senator DODD. How old are you?

BERNICE. Ten.

Senator DODD. How much do you think you've seen of that?

BERNICE. Too much. There are four parts of Capital City Inn, and in every part, something has to be going on. The fire department, the police—something is always happening around there. And that doesn't make sense for the little kids, including me and the other kids who live around there, to be seeing stuff that happens around there. They shouldn't be living in a bad environment like that. They should have a place where it is nice, and they can make friends as fast as any other place around there.

Senator DODD. Go ahead, Senator Metzenbaum.

Senator METZENBAUM. Bernice, tell us how you actually live. I mean, where do you live, and what are the circumstances?

BERNICE. I am staying with my relatives temporarily, because I'm going to have to go back to Capital City Inn soon. While I am

over there at my relatives' house, I go to school, come back, do my homework. I watch a little TV, but I don't go outside. I just don't go outside for some reason. I do my homework, watch TV, help my mother cook or something, do dishes or do something in there to help.

Senator METZENBAUM. But you live in a home with some relatives?

BERNICE. Yes, temporarily.

Senator METZENBAUM. Were you and your mother actually homeless, that you didn't have a place to live?

BERNICE. Yes.

Senator METZENBAUM. And where did you live then?

BERNICE. Well, we had to move from shelter to shelter, and we've been in the shelter for about three years now.

Senator METZENBAUM. When you were moving around that way, was it much more difficult for you to do your schooling and have a place to study?

BERNICE. Yes, because I had to transfer from school to school, because every place I went, it was far away from the school I had been going to, and I had to get transferred, and I wouldn't be able to finish school and get passed to the next grade.

Senator METZENBAUM. You have done very well.

Thank you, Mr. Chairman.

Senator DODD. Senator Rockefeller.

Senator ROCKEFELLER. Did the other kids pick on you a little bit?

BERNICE. Uh-huh.

Senator ROCKEFELLER. Tell me about that.

BERNICE. The kids at school say just because you live in the shelter that you are different from everybody else. And when you live in a shelter, you still have a roof over your head, you still get food in your throat. It does not matter. It is still the same as living in a house or an apartment. You still get the same treatment—a little bit—the only difference is some of the people around there can't be polite to nobody; they always want to fight, and they just can't control themselves. Like the things that happen at Capital City Inn and Pitts, people can't control themselves, and they get all upset, and they get depressed, and if someone comes to try to help them, they get all angry, and nobody likes to play with them anymore. It's just not right.

Senator ROCKEFELLER. Bernice, when we were in Chicago, we went to some housing projects, big housing projects with lots of families living in them. Some of those projects had been taken over by gangs, drug gangs, just gangs, and they just didn't want anybody to come in on their turf. And somebody might live in one of those projects, but if they came up, let's say, on the elevator—and they do have elevators up to the third or fourth floor—in the evening, there wouldn't be any light—the socket had been knocked out—and they live in terror all the time.

You said that you wouldn't go outdoors, and I read into that that you didn't go outdoors because you didn't want to get hurt by possible drug problems. But when you look at a housing project, for example, as opposed to a shelter, even a housing project that has that kind of violence, would you rather be in the project with the risks or be in the shelter with another whole set of risks?

BERNICE. It all depends. You say there's a gang around there, and they use drugs, and mess with old people. The people who live in a nice apartment building or a house, and they come around there, torturing them, telling them to move somewhere or they're going to get hurt—it's not right. I don't think anyone should have to get hurt because they live in a nice place, and there are gangs coming around there, messing with them. I think that's not right. People should have their own freedom and be able to do what they want to do without people torturing them.

Senator ROCKEFELLER. Are you afraid most of the day?

BERNICE. No, not really, because with my relatives, there is not a lot of stuff that is going on around there like is happening at Capital City Inn. It is a nice, peaceful place over there where my relatives live at. There is a little park up the street, there is another one across the street. It is nice around there.

Senator ROCKEFELLER. What about when you were in the shelter?

BERNICE. It is terrible.

Senator ROCKEFELLER. Were you afraid most of the day then?

BERNICE. Yes, sometimes, because of all the stuff that's been happening—people getting beat up, getting stabbed, stuff getting thrown in the windows, busted windows, little kids getting hurt. It's not right to me. People shouldn't be tortured like that just because they live in a shelter.

And kids who go to school, they get picked on and they get beat up just because they live in a shelter, they get teased at, and it's not right.

I get teased—I just don't pay any attention to them. At least I have a roof over my head and something to eat. Other than that, I'm not worried about nothing.

Senator ROCKEFELLER. Chris, if I could just ask one more.

Senator DODD. Sure.

Senator ROCKEFELLER. Bernice, when you were moving from shelter to shelter and moving, therefore, from school to school, and every day or every week or however often the change came, you had a whole new environment to adjust to, in some ways you've got to be an awfully strong person just to survive from one week to the next.

BERNICE. Uh-huh. All shelters have about ten people who are going to be bothering with you. So you have to believe in yourself and be strong, because something is going to happen when you're at the shelter. Someone is going to pick on you, you're going to get beat up, or you are going to get hurt.

People who live in apartments and houses who live next to the shelter, they don't want to be bothered with the kids. Some kids in the shelter try to be friends with the other kids, but they won't pay any attention to them because they live in a shelter.

Senator ROCKEFELLER. You must get angry——

BERNICE. Sometimes.

Senator ROCKEFELLER [continuing]. Along with being afraid sometimes. When you get angry, who do you get angry at?

BERNICE. The person who keeps bothering me. Sometimes I get mad at something or something that I did that was silly to do. If my brother comes around me and starts bothering me, I don't need to hit him or anything; I just get mad and start hitting on him be-

cause he keeps bothering me. I don't really take it out on him except when I don't be made, and he makes me mad; he just makes me take my pain out on him. And he gets mad at me, and he goes to his little quiet place and starts thinking about something. And I try to come back and say I'm sorry, and he just goes somewhere else and tells me to leave him alone. I try to apologize, but I don't mean to do what I do.

Senator DODD. Calvin, do you have any comments?

CALVIN. Yes. Around Capital City or the shelters, I see that most homeless children that live there that are poor, they see these guys coming in there with money, and they drive cars and are making fast cash—and some of them get pressured into growing up and doing things like that because they want to live a good life, and they want to be rich and have everything. There is a lot of peer pressure involved and things like that, and that is why some of the teenage drug problems have gone up.

Senator DODD. Charlene, you have been listening to all of this. How old are you, Charlene?

CHARLENE. Ten.

Senator DODD. You are ten. What is the name of the school that you go to?

CHARLENE. Anthony Boyd.

Senator DODD. And did you live in the shelter?

CHARLENE. Yes.

Senator DODD. What was it like in that shelter? [Pause.]

Did you like that shelter?

CHARLENE. No.

Senator DODD. Did it scare you?

CHARLENE. Yes.

Senator DODD. Why? [Pause.]

Do you want to share that with me? [Pause.]

Would you like to come up and whisper it to me?

Senator FOWLER. That would be the scariest thing of all. [Laughter.]

Senator DODD. It never scared you. [Laughter.]

Well, we'll talk to you a little later. We don't want to make you nervous.

Senator Fowler, do you have questions?

Senator FOWLER. Thank you. Just a couple of quick questions with the indulgence of the committee.

Bernice, what is your understanding as to why you don't have a home?

BERNICE. Well, I think it's because of some things—before I moved into the shelter, there are still some things that are bad in some environments like at Capital City Inn, but it is not as bad——

Senator FOWLER. Where is your mother, do you know?

BERNICE. Yes.

Senator FOWLER. Does she live with you?

BERNICE. Yes.

Senator FOWLER. Is she sick? Can she work?

BERNICE. Not really—her leg hurts—she can walk and stuff, but if she walks too long, it is going to start to hurt.

Senator FOWLER. When was the last time she was able to work?

BERNICE. I'm not sure.

Senator FOWLER. What was she doing the last time she went to work; do you remember?

Bernice. She was working at a fast-food restaurant called Roy Rogers.

Senator FOWLER. And did they lay her off, fire her, or she just couldn't stand on her feet and had to leave?

BERNICE. She had to leave because she was the only one back there and she couldn't get any help. Nobody was helping her. Everybody else was on the counters.

Senator FOWLER. And how many brothers and sisters do you have?

BERNICE. I have five step-sisters and brothers and one brother that stays with me. He is my brother. He is not my step-brother.

Senator FOWLER. He's your real brother?

BERNICE. Right.

Senator FOWLER. And he lives with you at your relatives?

BERNICE. Yes.

Senator FOWLER. And how old is he?

BERNICE. He's nine.

Senator FOWLER. And what about your step-brothers and sisters; where are they?

BERNICE. They are in New Jersey.

Senator FOWLER. Who looks after them?

BERNICE. Their mothers.

Senator FOWLER. Thank you, Mr. Chairman.

Thank you, Bernice, very much.

Senator DODD. Senator Fowler, we have with us as well a constituent of yours from Atlanta, Lorin.

Lorin has been gracious enough to come before the subcommittee. I should tell you it's not any easy thing to do because she has been homeless with her family. And Lorin, we appreciate immensely your willingness to talk about that. It is not easy to have a bunch of cameras and microphones and to have to talk about something that was difficult. But I wonder if you might want to share with us your thoughts.

I know you have a piece of testimony you prepared, and I want to express my gratitude and the gratitude of all the members of this committee for your willingness to appear before us.

Senator FOWLER. Are you a Georgian, Lorin?

LORIN. I moved there two years ago, so I have been there two years now.

Senator FOWLER. Good. Go ahead, please.

Senator DODD. I want to take a minute as well, before they all leave—I am very blessed this week to have 40 of my youngest constituents spending the week with me. These are 40 seniors from all over Connecticut who have been here all week, and they have spent the last hour here in the committee hearing, and I didn't want you to all leave, because I know you've got another meeting to go to, but I want to tell you all how proud I am to have all of you down here and how much it means to have you a part of this.

Thank you.

I am sorry, Lorin. Go ahead.

LORIN. OK. It would be helpful, Senator Dodd, if you all would just ask me the questions, and then I will give the answers. OK?

Senator DODD. Yes. Why don't you tell us about yourself—you were homeless for how long?

LORIN. Approximately 4 months.

Senator DODD. And how did you become homeless?

LORIN. I, at the time, was moving to Atlanta. The night that I arrived in Atlanta, my purse was stolen with all of my personal things, money and everything.

Senator DODD. Who helped you. Who did you turn to for help.

LORIN. I had no family or friends in the city. At that time, I called the Atlanta Police Department. They gave me the number of the Travelers' Aid Department, and I talked with Ms. Kitchen there. I spent the night at the Help House, which is a shelter for homeless families. The next morning I met with Ms. Kitchen, and we talked about my situation. At that time, she suggested that a good shelter for myself and my family would be the YWCA, which is in Atlanta. We made preparations, and I did go to the "Y".

Within three weeks of being at the "Y", I moved into another shelter which is called the transitional house. That type of shelter is more of a private-type shelter. Each mother and her children have their own private room, which is a little different from the "Y". The "Y" is just an open room for the mother and her children, but at the transitional house, you have a private room, which is nicer than an open shelter.

Senator DODD. How many children do you have?

LORIN. I have two.

Senator DODD. And then what happened? What was it like for your children?

LORIN. It was very depressing, stressful and emotional for them. It was the first time for them as well.

Senator DODD. How old were they, by the way, at that time?

LORIN. They were ten and seven at that time.

They have adjusted very well. They were strong for me and helped me to adjust to the changing situation that I was faced with being homeless.

Senator DODD. Were you working at the time when you ended up in that situation?

LORIN. No. At the time, I was not working because when I arrived in Atlanta, I was arriving to make a new home for myself and kids. But within the week that I was there, I did go on a job interview, and within two weeks, I was hired at a hospital, where I am still working now. I started in a position there in Central Services as a technician; my present position now is supervisor in that same department.

Everything has been going pretty well for me now.

Senator DODD. Things are getting better for you. How are the kids doing now?

LORIN. They are doing better.

Senator DODD. What was it like for other people there? Can you tell us about some of the other people you saw that you ran into in that situation?

LORIN. The people that I saw in the homeless situation were very disrupting. It was different types of people. You can't say they were all drug addicts; it wasn't all AFDC. They were from different types of surroundings, and it was a confusing thing. Basically, in

the shelter, the types of mothers would get themselves in that type group. If they were used to not working per se, they would hang together. And then you had mothers who were used to a job or working, but then fell into the situation of being homeless, and they were separate. So in the shelter, you had separate things there, pulling, of that nature.

Senator DODD. And did you see a lot of people come and go? Was it very transient?

LORIN. The largest comings and goings in the shelter were persons who were on AFDC or drug addicts. But persons who were in the work force were more stable as far as staying there and finding sources of getting homes for themselves and their families.

Senator DODD. And your children became sick?

LORIN. Yes. My son is asthmatic. In the change of climate, I have had more problems with him on that. Through living at the transitional house, the staff there gave me names of medical facilities for the homeless that I could use. The doctor who I took my son to was Dr. Jacobs, who volunteered his time for the homeless families in evenings, from 6 in the evenings on.

Senator DODD. Did any physicians come by the homeless shelter? Did Dr. Jacobs come by there, or did you have to go and see him?

LORIN. Primarily, you needed to go to the specified place where he would be. But he came by to visit the shelter and to talk, to let the other families know that he was available if they needed services.

Senator DODD. Were you fearful for the safety of your children with some of the people you have mentioned being around the shelter?

LORIN. Being blessed, I did not have that type of situation in the shelter with my kids. The problems that arose with my kids were in school. There were kids who picked on them, but that wasn't the largest problem. My son and daughter dealt with that part much better, having the kids pick on them. The thing that was hard for them to accept and to try to deal with was when the adult would talk about them in a negative way as far as being homeless. They couldn't understand why the adults would not help them, be more positive rather than negative, just because they were homeless.

Senator DODD. Would you explain more specifically what you mean? Give me an example or two of that, if you would.

LORIN. OK. With my son, I had a problem with one of the teacher aides wanting to make a difference because he was a homeless child, that there was a special problem with him, that he had a problem, which was not true; there was no problem there. After going to the school and talking with the principal and the teacher, they at that time counseled with my son and found out that he truly did not have a problem. And toward the end of that school year, both my son and daughter finished that year as honor roll students.

Senator DODD. Thank you.

Senator Rockefeller.

Senator ROCKEFELLER. I want to pursue that a little bit more. When you are homeless, and it isn't night-time, and so you are outside, how do you get treated when people look at you? Can they tell that you are homeless? Do they think that you are homeless? Are

they trying to figure out what you are? Are they trying to make a judgment about you, and do you feel that?

LORIN. Yes, because most of the time, in the mornings, you leave the shelter at 6 a.m., and at 6:30 in the evening you return back to the shelter. So most of the mothers, especially the mothers with small babies, had to carry as much with them to sustain them from 6 a.m. to 6:30 p.m. while they were out on the street, when they had no other place to go.

Most of the mothers would hang around the downtown areas, at the bus stops or in the train station, and the passersby would then know, you know, that this was what was going on, and they had no place to go. And they would get the bad looks, snarls, or whatever.

Senator ROCKEFELLER. And what do you see in their eyes when they look at you?

LORIN. What I saw in the eyes of people like that, the majority of the people, was—let me see how I can say this—you didn't get the feeling of them showing compassion. You got the opposite—you know, why are you here, what are you doing here—that type thing from them.

Senator ROCKEFELLER. Was it more painful than the racial discrimination looks that I am sure you have gotten over time?

LORIN. I think when you are homeless, being of whatever race, it doesn't make a difference. If you are white, and you are homeless, and a white passerby passes you, it doesn't make a difference. You are just as bad as myself, being black and being homeless.

Senator ROCKEFELLER. During the daytime, then, you had to take with you whatever possessions you had taken from the shelter, plus the children?

LORIN. Right.

Senator ROCKEFELLER. And then you'd go to, let's say, a bus station or a train station because at least that was a shelter that was covered, and there was probably going to be a seat there, it was probably going to be warm there if it was during the winter.

LORIN. Right.

Senator ROCKEFELLER. And what is there, is not one closeby?

LORIN. Then what most of the mothers would do would be go to the shopping malls, shopping centers, and just browse, walk through the stores and things of that nature.

Senator ROCKEFELLER. How old are you Lorin?

Senator DODD. You don't have to answer that question, Lorin. [Laughter.]

LORIN. Thirty-six.

Senator ROCKEFELLER. And how long have you been fighting this, living like this?

LORIN. At present, I have a place, but I was homeless for a period of three months. I was blessed with the help of the staff from the transitional house and with my skills of being able to get a job.

I would like to make another point. If you have the skills and the knowledge to go out and be in the work force, it is a little bit easier for you being homeless per se, rather than if you do not have the skills.

I was able to get a job and to make the homeless state for me much shorter than people who are not able to get jobs, which

makes their homeless state a little bit longer. So I am thankful for that.

Senator ROCKEFELLER. People that you know like yourself who have been able to get work because you have just kind of persisted at it, there must be at some point a breaking point where people that you have known just kind of give up. Maybe you know that they have the skills, but they don't see it, or they are not getting a job. Talk to me about that.

LORIN. OK. That part I think I can talk on. When you go and put in an application for a job, you would use the transitional house as your place of residence. Then the persons at the employer are more or less a little hesitant because this is not stability for them. So at this point, you as the person pursuing the job need to sell yourself and let them know that you are in this position only for a short period of time, and that even though it is not a permanent residence or it is not a residence per se, you still want the job.

So basically, when you are in a homeless situation, you have to sell yourself to let people know that you have the capability, and you are able to do the required things that are needed. Whereas I feel that if I had put down a residence on my application as a house or whatever, I don't think I would have been confronted with that type of questioning.

Senator ROCKEFELLER. When you have a job interview, people ask you questions—what is your name, how old are you, what have you done—and at some point, I guess they ask you where do you come from or where do you live. What do you answer? And if you are living in a shelter, does your experience from others or from yourself tell you that employers turn away?

LORIN. Yes, it tells me that employers turn away. In my experience, you as a person need to let that person know that your situation does not alter what you are. I think society is seeing being homeless as your average drug addicts, or people who don't want anything, and that is not always the type of person who is in the homeless situation. And when you are in that situation——[Pause.]

Senator ROCKEFELLER. Take your time.

LORIN. When you are in a homeless situation, it shouldn't have to be part of the reason why—I think it should be looked upon that you are trying. If you are strong enough to walk in to an employer and let him know that you want a job, then the situation of being homeless shouldn't be the question at hand. They should be thankful that you are taking a stand to overcome the situation that you are in, because it is not easy to walk into a—first of all, applying for a job is not easy in the first place. And when you are applying for a job and are in the situation of being homeless, that puts a little bit more pressure on you as well. So I think that it should not be used as a minus against you because you are in a situation that you are not able to help. I feel that for employers, or wherever you go for anything, that your situation of being homeless should not be looked upon, because there are many reasons that could have caused this which were not your fault. They should look at you as that you are trying to rise out of the situation that you are in. It should not be a minus used against you.

Senator ROCKEFELLER. But it works that way, doesn't it?

LORIN. It does, yes.

Senator ROCKEFELLER. I remember when I was a VISTA volunteer in West Virginia, there was a teenage boy who dropped out of school. He and I were good friends, and we'd talk about it, and I'd try to get him to go back to school because it was going to be good for his future, or better for his future, and he knew that, and I knew that. The problem was he only had one pair of pants. And he went to a school where the kids had better clothes and better teeth and all kinds of things. And he came to the conclusion that he knew it was better to go to school, but he just wasn't going to put up with what it was he had to go through with the other kids, with the teasing. He made a decision which society would say was an illogical decision but which you and I would understand is just people reacting to harassment.

LORIN. Right.

Senator ROCKEFELLER. Do you see any silver lining in any of this? You are sitting before a lot of cameras and a couple of Senators. What do you think we ought to be doing?

LORIN. There is so much. Change the format of homelessness. I would like to add also that, through my experience, if I were on AFDC—on AFDC, you are more recognized, more so than if you are homeless. Also, going through the different phases, it was suggested that you can get AFDC, you can get public housing—but that's not what I wanted. I wanted to have shelter for myself and my kids until I was able to do what I wanted, and that is to work in gainful employment that I enjoyed doing—not sitting home, waiting for assistance.

Senator ROCKEFELLER. When was the last time that you lived in a shelter which was your own?

LORIN. I don't understand the question.

Senator ROCKEFELLER. A house that was yours, an apartment that was yours.

LORIN. I'm living in an apartment now.

Senator ROCKEFELLER. But when was the last time before that, before you were living in the shelter—and you said it was only for three months—but when was it before that?

LORIN. Before moving to Atlanta, I was living in my own place at that time.

Senator ROCKEFELLER. You haven't changed; it is just that life has kind of collapsed in around you.

LORIN. That's right, that's all that happened.

Senator ROCKEFELLER. Thank you.

Calvin, what do you see in people's eyes?

CALVIN. Well, for the most part, people I see around, looking at the homeless, consider them as not caring or don't really want anything for themselves, have no values, no goals in life, and they just look at them and hold their heads down. They just think of them as trash around the city. And basically, that is not right. They shouldn't look at them like that; they should hope for the best for them and try to do something for them instead of treating them the way they do.

Senator ROCKEFELLER. Thank you, Mr. Chairman.

Senator DODD. Thank you.

Again let me say to you, Lorin, that it took a special amount of courage to come up here. You should know this, and I want you to know this. You have probably brought a lot of hope to some people who might read about you or see you, and you have done a lot of good for other people who can't be here. We can't invite every person who was ever homeless or faced with the kind of situation you were in before this committee. It is impossible. You have been courageous enough to come here and tell your story—and by the way, your short statement that you prepared, we will make a part of the record—and by coming here, you have helped a lot of people. I want you to know that I deeply appreciate your willingness to tell your story and to come here. It is not easy to have a bunch of people listening to the details of your life—no one likes that; I don't care what you do in life—to have everyone know about the difficulties and troubles you have had is hard enough. It can be embarrassing to talk about difficulties. But by doing that today, you have helped us, and you have helped a lot of other people, and for that, we thank you very, very, very much for coming. It means a great deal to us. And I would say, I don't know your children, but they are pretty lucky. They've got an awfully good mother.

And we thank you, Bernice. I'm glad you don't live in Connecticut and are not over 30. I think I would be worried about you running for the U.S. Senate and getting elected; I would be a little nervous about that. You keep up your outspokenness. You speak very, very well. You are very articulate.

BERNICE. Thank you.

Senator DODD. It is a pleasure to have you.

And Charlene, we're glad you were here. I mean that. I learned that you were ten years old, and I learned where you went to school, and you spoke up and told me that.

And Calvin, you were very articulate as well, and we thank you for coming here today. It means a lot to have people like yourselves come here.

A lot of times, it is just numbers and statistics and professional people, and they mean very well, and they are very, very helpful, but it is important for Senators and the public to know that these aren't just numbers we are talking about and not just statistics; they are real people involved. And by being here today, you put a face on the problem. People now can associate a name with a problem, and it becomes easier to get some help when we try to deal with these problems. So you have represented unfortunately far too many people in our country today, but by being here and expressing the same things they would if they could come here, you really helped them as well.

So on behalf of this committee and Senator Rockefeller and others, we really want to thank you.

Jon, we particularly thank you as well for your efforts and your work in this area. Hopefully, we will never have to have hearings on this again. I would love nothing more than in my tenure in the Senate to see the McKinney Act disappear because it is no longer needed to deal with the homeless. Wouldn't that be a wonderful day if we could shelf a piece of legislation because we have dealt with this issue effectively.

So on behalf of the subcommittee, we thank you, Ella, as well, for the fine work we do. We thank you for coming and being a part of this effort.

Thank you all very much.

Mr. VOIGHT. Senator, thank you very much. [Applause.]

Senator DODD. I'll ask our second panel to join us, if they would. They are very distinguished, and I hope I didn't suggest by my last comment that you don't mean an awful lot to us as people who work directly in this field.

Cindy Freidmutter is an attorney. She is the Director of Housing Development for the New York State Office of Mental Health. She authored the Robert Wood Johnson feasibility study on the potential for developing service-enriched housing for families. Her testimony will describe the scope of homelessness among American families, the demographics, the causative factors, with special emphasis on general conditions affecting children.

Dr. Irwin Redlener is a pediatrician. He is associated with the New York Hospital-Cornell Medical Center, and he is founder of the New York Children's Health Project, the mobile health team that I mentioned earlier that composer and musician Paul Simon is associated with, a health team treating children in homeless hotels. The doctor will describe the health findings among homeless children—malnutrition, iron deficiency anemia and missed immunizations.

Dr. Nancy Boxhill has already been introduced by Senator Fowler. She is a child development psychologist, sociologist, author, and Commissioner of Fulton County, Georgia. She has organized and administers several shelters and transitional housing facilities for homeless women and children. She will describe a day in the life of a homeless mother and child, having to leave the shelter by 8 a.m. each day, find after-school child care, and the like.

Dr. Jean Ciborowski is Director of Education Services, Boston Children's Hospital-School Functions Clinic. She will testify on and describe preliminary findings of a study she is conducting on the streets of homelessness and its effects on child development and respond to other testimony and describe the implications of how unmet needs such as nurturing, stimulation, guidance and so forth, at certain stages of character growth, may result in irrevocable damage.

And lastly, Eve Dubrow and Broderick Johnson, we thank both of you for coming. They are directors of the Homeless Children's Tutorial Project in the Nation's Capitol and will describe their experiences and will be accompanied by children they have worked with; I understand you've got a few of those with you as well.

Now, I apologize to you for lumping you all together like this, but it is for the purpose of time and moving along. We thank you all for coming.

We will begin with you, Dr. Redlener.

STATEMENT OF DR. E. IRWIN REDLENER, PEDIATRICIAN, FOUNDER AND DIRECTOR, NEW YORK CHILDREN'S HEALTH PROJECT, NEW YORK, NY

Dr. REDLENER. Thank you very much, Senator Dodd. I am very glad to be here to address you and Senator Rockefeller and others who are present to learn something about this extraordinarily difficult issue that the country is facing.

I am, as you noted before, a pediatrician, but direct, I think, what has now become one of the largest health care programs for homeless children in the country. And, similar to what you said earlier, there would be nothing better that I could imagine than having that kind of project not be needed. Really, speaking the words that I just said, which is to say that it is a very large project for health care for homeless children—that in itself bespeaks a tragedy that we are having to deal with in this country.

I want to say that as a pediatrician active in clinical medicine for 22 years, I really want to report basically that from the trenches, I am deeply saddened to say that things are really not very good for very, very many American children, and things are in fact getting worse.

The Eighties have been a difficult and very painful decade for children, particularly those at the bottom end of the economic ladder and those who are members of minorities.

A recently completed study by the House Select Committee on Children, Youth and Families declared that because of drugs, violence and family disintegration and worsening poverty that "childhood has become a far more precarious and less safe situation for millions of American children". And this story, which was just yesterday, was really quite closely on the heels of a front-page *New York Times* story not two week ago on the disaster awaiting the U.S. industrial work force as our generation of under-educated, ill-prepared and impoverished children become young adults in the early part of the next century.

I suppose we will one day look back on this decade as a bizarre sort of social and economic experiment where we thought somehow that massive cutbacks and short-changing of vitally-needed support programs for children and families was a good idea. We will want to understand how we got our families and children in such deep trouble, and we will be scrambling for ideas on how to rescue them from irreparable and permanent harm.

In the next decade, we are going to deal pure and simple with the kind of human damage control as a result of some of the most shortsighted policies and ill-conceived priorities ever seen in a modern civilized society. These policies have caused pain and suffering for many vulnerable Americans and have made many Americans vulnerable who should have been and could have been reasonably happy and productive citizens.

One clear example of the policy failures that have led to the problems that we are experiencing today was certainly the cutbacks in Federal housing supports that occurred during the Eighties. Coupled with rising poverty rates and increased costs of living, we have produced virtually a subculture of homelessness that now

impacts on families and children in the dramatic, poignant and painful ways that have been described by the last panel.

So here is the situation as I know it regarding the homeless children that we work with and the national extent of the problem as it currently stands.

The first point is that it makes no sense to me to speak of just homeless children who happen to live in shelters with their families. This is the deceptive tip of a very, very deep iceberg.

In New York City at any given moment, there are between 7,000 and 10,000 children living with homeless families in the shelter and hotel system. Another 2,000 to 3,000 children are the so-called "unattached homeless" kids who are without their parents and include the runaways living on the streets, and New York's children who are now called "nomad" children. The runaways tend to be older adolescents. The "nomads" are for the most part kids in the 10- to 15-year age range who drift in and out of the system's congregate shelters, group homes, residential centers, and the streets.

But by sheer quantity, the most important group of what we are now calling "housing vulnerable" children are those living with their families in doubled and tripled up apartments. A recent study in New York indicated that there are 103,000 such overcrowded indigent households, or 206,000 families with at least 400,000 of New York's 1.2 million children living on the brink of homelessness, which can occur tomorrow or the next day or the day after that.

These children and their families are literally on the economic precipice. They form a vast pool of pre-homeless poor people who sooner or later enter the ranks of the officially homeless. In New York, there are 500 to 700 families with 1,000 to 1,500 children who enter the emergency shelter every month.

All of these, homeless kids with families, unattached homeless runaways, and "nomads", and the doubled-up near-homeless, form a huge group of children which, as I said, we are calling "housing vulnerable". And I believe that under this categorical umbrella may be counted some 450,000 children in New York City. Nationally, the estimated number of "housing vulnerable" children is really quite staggering. The National Coalition for the Homeless estimated recently that 3 million people don't have permanent and stable domicile. If 40 percent of this group are members of families, there are something on the order of 800,000 children, really, among the homeless families through the United States.

In addition. a recent report by the American Affordable Housing Institute indicated there are up to 14 million poor and economically borderline families who live doubled up or tripled up in America. These families, on the brink of total economic disaster, are likely to include some 25 to 28 million children.

And if finally we add to the tally a smaller but significant number of unattached homeless children and runaways, the total is then estimated to be as high as 30 million "housing vulnerable" American children.

These kids urgently need—urgently need—a great deal of attention. They are in deep trouble from every conceivable perspective, and I am going to spend just a couple of minutes mentioning, really, only a couple of examples of the kinds of issues and problems which will require major expenditure of resources.

I am going to focus on three areas and just touch on them in semi-bullet fashion, but they are the areas of medical, psychological and educational needs.

Senator DODD. I don't want to push you along, Doctor, and I apologize to you—but we do want to get to the other testimony as well.

Dr. REDLENER. Yes, okay. I'll give you an example. An 11 year-old boy, Tyran, was seen by our project in August of this year. He was living in a congregate shelter, separated from his parents for some time. The worker who introduced him said he had a speech problem and "seemed a little slow". When we examined this boy, he had a large, never-repaired inguinal hernia, evidence of delayed development, a somewhat small head circumference and a heart murmur.

When we opened his mouth, he had virtually no palate. He had a cleft palate that was so severe you could see the entire internal cavity of his nose—the kind of medical situation that is normally picked up in the newborn period and corrected in the first few months of life.

It was unimaginable that an 11 year-old in 1989 could have fallen for so long between so many cracks in a really diseased and inappropriate system.

We are amazed at the kinds of children we find among our homeless patients. In the one to two year-olds that we saw in New York City last year in the homeless project, we only could document up-to-date immunizations in 28 percent of them at the time of their initial visit. For all age groups, an average of one child in every 19 requires specialty care, a rate of approximately three to four times that of the general typical pediatric population.

We regularly see children with severe language and developmental delays and an enormous number of children who suffer from psychological problems of the type that Dr. Ciborowski will talk about in a few moments.

Educationally speaking—and I don't know who on the panel is going to talk about this—I will say that the medical problems, the psychological problems, the educational and developmental problems are not separable anymore. The children are all in fantastic need. The medical problems interfere with schooling. The school problems interfere with development. The school problems interfere with the children's ability to obtain jobs and reach successful points in their ability to create satisfactory lives and earn a living.

Senator DODD. Doctor, let me just interrupt you one second. I want to be careful, because one of the problems it seems to me is drawing those immediate assumptions. I did not ask her this, but Lorin's two children while they were in that situation, she said they graduated with honors from school. And I think we have got to be careful sometimes because the assumption is that because you are in that situation, you automatically have those problems. You don't disagree——

Dr. REDLENER. Oh, that's absolutely true. In fact I was going to make the point that many of the families that we see in our program and that are in fact caught up in the trap of homelessness, including the kids who are without parents who are just on the

streets, are really incredibly successful in managing to deal with some very, very difficult situations.

In fact, the fact of the matter is that we know that the children who have to go through this system are able to succeed at very high rates. The question is that they have to go through such enormous trauma and difficulties in doing so that we end up with a lot of children who may have been much more successful than they turn out to be. And you are seeing here at a Senate hearing a tip of an iceberg; and I am seeing in the streets and in the trenches thousands of children who in fact do not have the opportunity to make their way in the world the way some kids do.

But the fact of the matter is that we have seen some very extraordinary parents. In fact, my comments say that in spite of all the doom and gloom, I'm convinced it is not yet too late to do something about this whole crisis.

The challenges that face the families are enormous and really unimaginable by the standards of most of us. But the teens that we work with, even the unattached homeless 10- to 15-year-old shelter nomads who come from horrendous city environments, can hold a great deal of hopefulness. These children individually need a lifeline that offers a human connection and basic caring, and this is fundamental.

But also, the fact of the matter is that these children as a group need public policies and programs which demonstrate that Government understands the risks to which homelessness and poor children are exposed and the long-term consequences to all of society of not addressing those risks on an immediate basis.

There are dramatically successful steps that can and have been taken which should be enhanced in order to reach every needy child in the country. And the facts are clear enough, and we don't need demonstration projects and pilot programs—we need a series of actions that are concrete and specific and deal with these specific problems.

We know that for every dollar spent on prenatal care than more than three dollars in neonatal hospitalization and future medical costs are saved, and for every dollar spent on childhood immunizations, $10 in later medical costs are saved.

We must have affordable, preventive and primary health services, at least for all pregnant women, infants, children and adolescents, and particularly those at risk.

Again, I think my sense of this is that we are dealing with relatively small numbers to do tremendously potentially successful programs that meet the needs of these children. I do not think we should allow ourselves to deal with the problem that we have now, which is what we are seeing, where categorically, the people dealing with drug issues versus the people dealing with homeless health care are having to fight with one another over a relatively small pot. And as concrete recommendations, we are hoping that full funding of Stuart McKinney in the interim, until the problems are solved, is something that will take a high place on your agenda and your priorities.

I would just conclude with this thought, that homeless and housing vulnerable children in America are in deep trouble. We are doing far too little to recognize and ameliorate the crisis. I believe

it is not unreasonable to judge the quality and maturity of a society on the basis of its commitment to the protection of its children, because children represent the generational continuity without which no civilization can endure. I suggest that this principle guide our policies and priorities, and I know they do in your case.

I thank you.

Senator DODD. Thank you very much, Dr. Redlener, and we will include your entire written statement in the record.

[The prepared statement of Dr. Redlener follows:]

PREPARED STATEMENT OF DR. IRWIN E. REDLENER

UNACCEPTABLE LOSSES:

THE CONSEQUENCES OF FAILING AMERICA'S HOMELESS CHILDREN

Testimony to:

United States Senate
Committee on Labor and Human Resources
Subcommittee on Children, Family, Drugs and Alcoholism
Chairman: The Honorable Senator Christopher J. Dodd

Submitted by:

Irwin E. Redlener, M.D.
Associate Professor of Clinical Pediatrics
Department of Pediatrics
Room N-053
The New York Hospital-Cornell Medical Center
525 East 68th Street
New York, New York 10021
(212) 746-3292

Mr. Chairman, Members of the Subcommittee, staff, and guests:

I am Doctor Irwin Redlener, a member of the Department of Pediatrics at The New York Hospital-Cornell Medical Center in New York City. I am also Director of the New York Children's Health Project which provides care to homeless and near homeless children.

When it was founded in 1987 by singer Paul Simon and me, The NY Children's Health Project concentrated on children living with

their homeless families in several of the notorious welfare hotels of New York City. At this moment, as far as we know, it is the largest program devoted to the medical care of homeless children in the United States.

In 1988 and 1989, the target population of the Project has expanded to include so-called "near homeless" families and unattached homeless children, that is to say children who are not living with families and who are not in foster care.

In fact the three groups noted above: (1) children in homeless families, (2) children in "near homeless" families and (3) unattached homeless children, might all be called "housing vulnerable". They comprise a much larger group of young Americans at extreme risk than is generally appreciated.

Even if this was a small group, we would be deeply concerned about these isolated, highly vulnerable children. We would be compelled to ensure for them an appropriate array of social supports, a viable safety net, access to health care and education and an opportunity to escape from the trap of poverty and homelessness.

But the reality is that in America homeless and housing vulnerable poor children are not a small, easily identifiable

group. On the contrary, we may be dealing with millions of such children. Some live with their families in shelters and welfare hotels; some live alone - both in the system and on the streets ; still others live in cars or, with their families, doubled-up in ghetto apartments.

What do all these children have in common?

First of all, they are all very needy and highly vulnerable. Secondly, unless appropriate intervention is initiated, only a small percentage will escape the ugly cycle of poverty, ill health and loss of potential productivity in society. These children are part of America's third world.

Let me cite a few specifics from my own city:

In New York City alone, at any given time there are from 7,000 to 10,000 children living with their homeless families.

There are another 2,000 - 3,000 unattached children and youths who are without permanent domicile. Some of these unattached children are runaway or throwaway teenagers; some are children under care of the City but living "on the circuit". These children spend months, sometimes longer, drifting from congregate shelter, to group home, to short-term foster setting

and, too often, to the streets. Some of these children, particularly teenagers, never get to the group homes or congregate shelters. These are the runaways for whom prostitution, drugs and unpredictable violence are a way of life.

But by far the largest group of children at high risk in New York City are those called "the hidden homeless". These are members of families living in doubled-up households. Families who are on the precipice of frank homelessness. Families without financial resources, without support systems and without hope. They live in a state of perpetual transience, seeking shelter in poor and overcrowded apartments with friends or relatives, who are themselves poor but willing to share what's available. Some families do not stay doubled-up for long; they leave the crowded apartment, enter the homeless system and then return again to the ranks of the hidden homeless.

A recent study in New York found that 69% of newly homeless families had been living doubled-up the previous night and 81% were doubled-up "in the recent past".

How many families are actually doubled-up at any given time in New York? According to this cited survey: 206,000 families. [illegible] family this could

Closely related to this group are the recently homeless and near homeless families, a virtually uncountable number of highly vulnerable families who, while profoundly poor, do not live doubled-up, but do subsist in severely inadequate housing.

The housing situation, in general , for children in New York is worse than any of us could have imagined. To begin with, of New York's 2 million children, nearly 1.2 million or 60% are living below the federal poverty guidelines. The homeless and the near homeless children we've been discussing certainly are among this number. But how are the other poor children faring in terms of housing? Unfortunately, the situation is hardly encouraging.

Consider that New York City, if things go well, will have 300,000 decent, subsidized apartments available for economically deprived families over the next few years. At most, this represents physically appropriate housing for 750,000 to 800,000 children. For most of these units, "physically appropriate" means barely adequate. The neighborhoods are falling down, the crack dealers run out of control. Parents worry and struggle to provide a minimum of protection and security for their children.

The bottom line is that New York City like many of its urban counterparts across the country, has a huge number of

indigent children with a very large and growing percentage of them living without permanent, stable or safe homes.

Nationally, the numbers are genuinely staggering. According to The American Affordable Housing Institute, there are up to 14 million poor and economically borderline families living doubled-up. And, as estimated by the National Coalition for the Homeless, some 3 million people are actually homeless in the United States.

If 40% of the homeless are members of families, and two-thirds of those children, as many as 800,000 American children may be homeless. If we assume the 14 million families as being "near homeless", this could include some 25 to 28 million children.

Adding it all up, including the unattached homeless children, we may be facing as many as 28 to 30 million housing vulnerable American Children - children without stable, acceptable housing, or without permanent caretakers or both. The bottom line, clearly, is that a staggering, unprecedented number of our children face unacceptable risk to themselves and to the future well being of our society.

DEFINING THE RISK

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I want to be very clear about the risk faced by homeless children because , while it is painful and difficult to appreciate what is in store for these children, it is nonetheless essential to appreciate the harsh reality in order that appropriate steps might be taken in a timely manner.

Secondly, it should be emphasized that the risk is not simply a matter of individual children and their families - even large numbers of them - who are being exposed to a variety a enormous, even life-threatening hazards. It is also not simply a matter of moral imperative that these concerns be addressed urgently.

It is much more. It is that the aggregate risk to all these children is a threat to our basic societal infrastructure and the ability of subsequent generations to survive in a productive and secure manner. The problem is, there are simply too many children with too many problems to ignore without jeopardizing the future of our country.

The question is: what happens to " housing vulnerable" children? I will respond by discussing issues of immediate impact first and , later, some predictable long-term consequences for homeless children. The three areas of concern I will focus upon are: medical , psychological and educational.

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Immediate Concerns

* Medical

.. An eleven year old boy, Tyran, was seen by our project in August of this year. He was living in a congregate shelter and had been separated from his parents for some time. The worker who introduced him said he had a speech problem and "seemed a little slow". When we examined this boy, he had a large, never- repaired inguinal hernia, evidence of delayed development, a somewhat small head circumference and a heart murmur.

He certainly did, as well, have a speech problem. But, upon opening his mouth, I saw something that was new to me even though I've been involved with clinical medicine and pediatrics for twenty-two years. This boy had no palate. I could see into his nose and sinus area from the inside of his mouth. No wonder he had a speech problem.

While I've often seen this in newborns born with a cleft palate, it is caught and corrected surgically early on. It was unimaginable that an eleven year old in 1989 could have fallen for so long, between so many cracks.

This child needed a complete medical evaluation. He needed

psychological and educational testing. He needed a pediatric cardiologist and a surgeon. He needed a genetic and metabolic work-up and , he really needed a skilled ear, nose and throat surgeon to begin work on the huge cleft palate.

Among the one- to two-year-olds we saw in the New York Children's Health Project last year, we could only document up-to-date immunizations in 28% at the time of the initial visit. For all age groups, an average of one in every 19 children needed to be referred to a specialist for a previously unrecognized or untreated but serious medical problem. This is three times the rate of specialty care need seen in the typical pediatric practice.

Ear infections are among the most common problems encountered in pediatric practice. Usually, a 10 day course of antibiotics takes care of the situation. Occasionally, the medicine doesn't work or the child gets repeated infections. Rarely , surgery is needed to clear fluid and infection out of the middle ear. Long term complication are hardly ever encountered.

But for homeless children the story is different. Families are cut off from their regular clinics and providers. The struggle for basic life needs is intense. The poverty and

isolation and disorientation of prolonged homelessness may be complicated by crack or alcohol abuse provoked, at least in part, by situational despair. The very ability of a family to function is hampered or paralyzed.

So, for a homeless family, the fever caused by a child's acute ear infection may not have the highest priority. Availability, accessibility and affordability of medical care is a serious question. The bottom line: the infection doesn't get treated and the problem becomes prolonged. The infection evolves to a chronic state. Hearing may be impaired. If the child is young enough, this can interfere with language development. If he is older, he won't be able to quite hear the teacher in the temporary school where he's been placed while the family is homeless. He may get into trouble for "not listening". He certainly won't learn much and he'll pick up a label or two that can plague him forever.

Overall, these children simply do not receive routine, reliable quality health care. They remain at high risk for many health problems. Their medical problems remain undiagnosed and undertreated if they receive medical attention at all. Medical complications and secondary problems abound. Furthermore, the conditions they live under - the squalor, the lack of safe food storage and preparation facilities, and the drug infested and

physically dangerous environments, predispose these children to a substantially increased rate of disease and injury.

* Psychological

A nine year boy with a long history of having been physically abused by his parents, both of whom were currently in prison on drug related charges, said he was in and out of group homes and congregate facilities for " a real long time". He missed his brothers and sisters and had no idea where they were. He even cried for his mother - almost every day. He was acutely and painfully depressed. I asked him what he wanted to be when he grew up he told me, this little boy from the worst ghetto in Brooklyn, that he wanted to be an architect - an idea inspired by a teacher the last time he was in a regular school. I asked him what he thought was going to happen to him and if he really thought he could become an architect. He said he didn't know what was going to happen tomorrow or where he was going to grow up.

Many homeless children are depressed - particularly those who are unattached and separated from their families. This is so even if the family was far from ideal. Those who do live with a parent or parents in a homeless shelter frequently experiance overcrowding, situational stress and disorientation. Some children have serious psychiatric problems and behavioral

difficulties. A large number of children suffer from physical, emotional and sexual abuse. Many need acute and long-term psychological evaluation and follow-up. Far too few ever get this kind of care.

* Educational

Before the New York Children's Health Project was conceived, Paul Simon (the singer) and I were given a tour of the notorious Manhattan welfare hotel, the Martinique. 1200 homeless men, women and children occupied this isolated, filthy, overcrowded monstrosity. Through some perverse act of magnanimity of the hotel's owners, who were getting as much as $3,000 per month per room, many city and private agencies were allowed to function in the building - along with the drug dealers and prostitutes.

Yet, when we entered the building , in the middle of a weekday, there were school-aged children everywhere. Why weren't they in school? The schools in the neighborhood had trouble accommodating the influx of homeless families. The parents and children had trouble getting to school. The teachers and other students often ostracized the "homeless kids". These children missed 25 to 50 % or more school days and were getting more and more behind. And the further behind they fell, the worse they did.

To make matters even more frustrating, these children pick up designations and diagnosis like "hyperactive" and "disruptive" and "truant" and "slow" - even though many of these labels were beyond their control or blatantly incorrect.

Finally, diminished access to health care means that these homeless children get sick more often and stay sick longer than their domiciled counterparts - one more barrier in the way of a successful educational outcome.

Ultimately, many homeless children with educational deprivations become school dropouts. They will never get the basic tools to compete and succeed in an ever more complex and competitive society.

Long-term

There is no question in my mind that a huge number of American children are in deep trouble. Homeless, near homeless, and housing vulnerable children, who may number, as I indicated earlier, as many as 30 million, face a risk to their health, safety and well-being. Failure to manage this problem like the crisis it truly is, will have nearly incalculable results.

I must emphasize that this is not to say that every child is a lost cause or that no family can pull together through the misery and challenges of poverty and homelessness. It's just that the chances of a child, under these conditions, remaining free of avoidable physical and psychological problems and the chances of completely fulfilling the potential of a full and productive life are substantially diminished.

Ponder the following:

* Of the 30 million homeless, near homeless and housing vulnerable children more than 1,000,000 excess medical specialty referral needs costing nearly $300 million per year in basic consultation and ancillary services will be required, most of which would have been avoidable or preventable if health care access and availability were adequate. This number is computed on a $300 subspecialty and consultation cost estimate based on a three times the expected rate of referral need. It does not include costs of surgical care, or long term chronic illness.

* High rates of school absence among homeless and housing vulnerable children will compromise the education and future learning potential of at least 20-25% of them. Children so compromised who do not graduate from high school will have an

unemployment rate 500% higher than college graduates. One out of every five dropouts and their families will live under the poverty guidelines.

* Societal costs of support services to underemployed, indigent young adults who were once homeless and housing vulnerable children, will be counted in the multiple billions of dollars.

* Drug and alcohol abuse is highly prevalent among homeless and near homeless indigent people. Associated criminal activity, the need for prevention, treatment and legal and judicial services will exact a heavy financial and human cost.

* The costs to American industry of this large pool of undereducated young adults attempting to enter the work force are incalculable. A recent front page series in the New York Times underscored the massive crisis being faced by U.S. industry in the coming generations due to an increasingly incompetent work force.

Conclusion

The bad news is that America is headed for a disaster of unprecedented proportions. An entire generation faces truly unacceptable risks that will not only jeopardize the future and

potential of each child born into poverty but will cost all of society in ways that few could find acceptable: a poorly educated, increasingly incompetent workforce, more crime and substance abuse and huge excess costs associated with medical and psychological problems that could have been prevented, treated early or otherwise avoided.

There is a " good news" side to this story however. It is this:

I am convinced it is not yet too late. For the most part, while the challenges facing homeless families are enormous, unimaginable really by the standards of most middle and upperclass Americans, many homeless parents - including single mothers- have not come close to giving up. They hold their families together, protect their children and care about each other in places like the welfare hotel hell-holes of New York City. There are many heros and heroines among those mothers and fathers , and they should be more widely recognized in these terms.

In addition, many of the teens we work with, even the unattached homeless 10 to 15 year old shelter nomads who came from horrendous inner city environments, hold out an astonishing degree of hopefulness. Few are irreversibly despairing - even

when their own personal situation is as bad as one can possibly imagine. These children individually need a lifeline and that takes a human connection and basic human caring.

The point is that these children, as a group, need protection and a real safety net. They need public policies and programs which demonstrate that society and government understand the risks to which these children are exposed and the long-term consequences of not addressing these risks now.

There are dramatically successful steps that can and have been taken and which should be enhanced in order to reach every needy child in this country. And the facts are clear enough that we don't need demonstration projects and pilot programs. We need large scale action:

- every $1 in prenatal care saves more than $3 in neonatal hospitalization and future medical costs;

- every $1 in childhood immunizations saves $10 in later medical costs;

- Head Start , one of the major success stories of the War on Poverty has a proven track record of increasing long term academic success. Yet , less than 20% of eligible children are

able to take advantage of this program. From an economic point of view, $1 spent on quality preschool saves $4.75 in later costs of special education, public assistance and crime management.

These are only a few examples of programs that work and programs that should be massively expanded in order to reach every eligible child.

What hasn't been said is that basic decency, common sense and a clear moral imperative compel us to attend to the immediate and long-term needs of our children. For a fraction of what the Savings and Loan bailout will cost the taxpayers of this country, we could virtually guarantee preventive and curative health care, quality preschool education , job training and substance abuse prevention programs for all American children at risk.

I conclude with these thoughts: it is not unreasonable to judge the quality and maturity of a society on the basis of its commitment to the protection of its most vulnerable citizens, its children. Because children, in fact, are the key to the continuity of society. In fact, no civilization can endure without fully appreciating the need to attend to its own continuity.

Unless we have accepted the possibility that the age of

America's great leadership among the community of nations, is somehow winding down, we must take whatever steps are necessary to save a generation which is at greater risk than any in recent memory.

I hope I have left you with the sense that not only should we turn things around , but that it is imperative that we do so as if every moment lost today threatens a generation tomorrow.

Thank you.

Senator DODD. Because of the element of time, and we want to get to the questions, every one of your prepared statements or testimony will be included in full in the record. If you could summarize your points, then we can get to the discussion—in fact, I'd like some of you even to talk with each other a little bit; I'd be interested in a little dialogue among yourselves as well as questions from us. I know I have found that helpful in the past. You people work on these issues every day, and if you are kind of talking with each other a little bit, I find the hearing record is improved to that degree.

Dr. Freidmutter, I thank you for being here.

STATEMENT OF CINDY FREIDMUTTER, ESQ., ATTORNEY, AND DIRECTOR OF HOUSING DEVELOPMENT FOR NEW YORK STATE OFFICE OF MENTAL HEALTH, NEW YORK, NY

Ms. FREIDMUTTER. I just want to correct the record. I am not a doctor.

Senator DODD. I apologize. I never made a mistake by calling a sergeant a general. You are an attorney.

Ms. FREIDMUTTER. I am an attorney, that's right. I do not practice law. I have been a local official in New York City Government, and I now work in State Government, and I have spent virtually my whole career—unfortunately, I came into the Government in the late Seventies when homelessness was just becoming a problem. It wasn't a problem for children then; it was a problem mostly for people who were deinstitutionalized mental patients. I was specializing in health law, and I ended up inheriting that piece of work in my old job.

In the course of my 8 years in city government, the crisis of homelessness moved from a problem of single adults who had disabilities to normal, healthy children who had poor parents.

I have spent a lot of years in city government, now in State Government, and recently working for the Robert Wood Johnson Foundation, to try to develop some strategies to get past the crisis. So I really want to spend the few minutes I have to talk on that crisis.

There is one point I want to make that may not be made explicitly by the doctors, who have done a lot of studies about the health care and psychological damage of the kids.

One of the things I think you notice when you are not a doctor, and you can't pick up the pathology that they might pick up when they look at a child, is some of the normal things that are missing for these children.

I have been to many shelters in New York City over my years as a city official, and the Robert Wood Johnson Foundation asked me to travel to a number of other cities around the country. So for the first time last year, I got to—you know, in New York City, you always think of New York City as the one with the biggest and the worst problem—I got to travel to other cities, and I was appalled because in many other cities I found conditions much worse than mine. I saw homelessness spread to many more types of people—people who had had jobs, people who came from so many parts of the country. You always feel sort of isolated when you are working in the trenches, and it opened my eyes.

One of the things that you realize when you talk to families and you talk to people who work with families is that there are children growing up who have never known what it is like to have a refrigerator. You know, you come home from school, and you go and get a glass of milk—well, there are kids who have never had a refrigerator and have never been able to get a glass of milk.

There are kids who have never had a kitchen table to have dinner at. They think eating dinner is what you do sitting on your bed in the hotel room, or sitting on the floor of an armory.

One of the most heart-rending things is when you see toddlers, infants, who are strapped into strollers throughout the whole day. And you talk to the mothers, and the mothers say, well, it is the only way to protect them from the rats on the floor; you have to keep them there. But those little kids never have a chance to toddle, they never have a chance to use their limbs. It is the only protection the mothers have for them because there is no space for these kids to go, there is no place to play.

But these children, when they start trying to walk when they are two or three, walk like they are crippled because they have never had an opportunity to have basic exercise.

When Robert Wood Johnson asked me to do the study—they are a health care foundation, and their interest was in trying to meet the health care needs of people who are sick—what was the most disturbing about the research I did for them was that there are normal children, children who had no disabilities—were not born into the world from crack-addicted mothers, were not HIV-positive because their parents had AIDS, were not low birth weight when they were born—and those children are getting sick because they are homeless.

Homelessness is bad for children's health, and it also leaves them with no idea about how to be a normal child in society.

One of the things that impressed me about the children and the mother who testified right before us was the strong sense of family among all of them. They all knew their brothers, their sisters, their mothers. There was a real sense that they were going to make it through—and I think they will make it through. But there are so many people out there who have been torn apart by being homeless, who have been worn down by being homeless, and who have no memory of what it is like to be a normal person in this society. They are truly like refugees. It is like taking someone from the Third World and putting them into the industrialized society.

We are denying hundreds of thousands of children an opportunity to have the skills to function. I mean, I'm not even talking about anything fancy; I'm not talking about good education. I think that that alone, we are going to lose children that should never have been lost.

What I urge the Robert Wood Johnson Foundation to do and what I urge you to do is to think about some permanent solutions, because one of the mistakes we made in the mental health system, of which I have a lot of expertise, we have focused a lot on transitional housing to try to take people who were institutionalized for a long time and try to give them social skills, and we kept moving them from transitional facility to transitional facility and never focused on where they would ultimately live. And what ended up

happening is that a lot of those people ended up living in the streets.

With children particularly, they can't move all the time. What the children need more than anything else is some stability. So what we need to do for these children—and maybe we can't do it for all the children at once; we don't have the resources to do that—is to start focusing on affordable, permanent housing that has the kind of support services those families need to rebuild their lives.

We have families that are just akin to refugee families. Some of them, some of the people you heard from today, have ties, have families still in this town, or have job skills where they can build up some life for themselves. But most of the families who are homeless—many of them—have been in the system for so long they have lost their ties, they have lost connection to their relatives, they have been beaten down. And you can't just put people in housing. Those little kids need help when they go to daycare or they go to school. They are going to have some special problems. And they are problems that can be overcome. I'm not suggesting that they be put in special classes or segregated. But if we don't give those kids the help they need, whether it is counseling, remedial education, some help to daycare workers in how to deal with children who are going through emotional trauma—I went to daycare programs that are being funded through McKinney for homeless children which do give play and meals to kids, and that is something, that helps in a crisis. But there are kids, workers tell me, who throw themselves against glass doors, two and three year-old kids, because they want their mothers to stay; they don't want their mothers to leave. They think they will never see their mothers again. And the workers have no idea what to do for those children. The mothers have to leave because the mothers have to find a place to live, they have to get on welfare, they have to look for a job. But we have to do something for those children. And I think something can be done. The professionals can help. But very little effort is being placed on what I think is not a very costly effort to look at daycare programs and school programs that already exist, and give a little infusion of help for those special families—because I know in New York City, and I have seen in Los Angeles and Seattle, there are going to be substantial housing programs for homeless families in a number of communities, and unless we rebuilt the infrastructure of social services, health and support, those families are going to have a hard time getting back into society.

What I would like to offer is that in the future, in terms of legislation, any help I can give. I have visited many innovative programs and spoken to many people with some good ideas, and I'd love to help in trying to suggest some strategies.

Senator ROCKEFELLER [presiding]. Thank you very much.

[The prepared statement of Ms. Freidmutter follows:]

PREPARED STATEMENT OF CINDY FREIDMUTTER

Senator Dodd and members of the Subcommittee, my name is Cindy Freidmutter. I am currently the Director of Housing Development for the New York State Office of Mental Health. For many years, I served as an advisor on health, social service and housing policy to the President of the New York City Council.

I appear before you today because I recently conducted a study for the Robert Wood Johnson Foundation entitled Service-Enriched Housing for Homeless Families. My report describes the destructive effects of homelessness on the health and welfare of family members, particularly children, and the need for a national program to provide service-enriched housing to homeless families. I appreciate the opportunity to speak with you today about the troubling circumstances endured by homeless children, and some strategies I identified for helping these children.

In order to conduct this study, I visited shelters and programs for homeless families in six cities--New York City, Denver, Los Angeles, Seattle, Boston and San Antonio. My report describes innovative programs in four of these cities. I also spoke with dozens of professionals--shelter operators, day care workers, doctors, psychologists and social workers--who provide direct care to homeless families, in addition to the families themselves. I read many of the studies about homeless families and, in some cases, interviewed the researchers. My report, which I am submitting for your consideration, provides the full picture of what I found. In my remarks today, I will summarize my findings:

In the 1980s, hundreds of thousands of American children have been robbed of a normal childhood because of their families' homelessness. The majority of homeless children are less than six years old. Many live for months at a time with their parents in overcrowded hotel rooms located along highways, near airports and in city centers--locations closer to drug dealers and pimps than playgrounds and schools. The less fortunate live in the backseat of cars, constantly moving, with only occasional respite in a church basement or shelter.

Large numbers of American children are growing up homeless and at risk. The Academy of Science estimated last year that about 100,000 children are on the streets or in shelters with their parents at any one time. An equal number are probably separated from their parents or in temporary housing. A significant number of children have experienced homelessness in this decade because, unlike individuals, families are homeless for relatively brief periods averaging less than a year. Their numbers remain large, however, due to a continuing influx of new families. In fact, the U.S. Conference of Mayors reports that the number of homeless families requesting emergency services has grown significantly in recent years.

While some of these children entered the world addicted to drugs or suffering from AIDS, the overwhelming majority were born with no physical or mental disability. However, few children, even otherwise healthy children, come away unscathed physically or psychologically from the experience of homelessness. The

emotional trauma, prevalence of physical illnesses and developmental delays suffered by children who are homeless have only recently been documented.

The fact that homelessness can irreparably damage children should come as no surprise. These "refugee" youngsters suffer from the accumulated ill effects of insufficient sleep and food and inadequate sanitary facilities, but there is more. For starters, homeless youngsters simply have no experience of the normal life of an American child, which leaves them without the basic social skills necessary to appropriately function in this society. The homeless child is in effect the 1980's equivalent of the institutionalized psychiatric patient. For example, these children have lived whole lives without kitchens, some no longer remembering or never knowing what it's like to open a refrigerator door for a glass of milk or to eat dinner with their family at a table. These homeless youngsters learn to carry their clothes from place to place in a plastic garbage bag, rather than to hang them in a closet. They have no experience of remaining anywhere long enough to make friends or finish a school year.

Homeless children predictably suffer from a number of developmental delays, which may permanently limit their future potential. For example, homeless babies confined to the backseat of cars or rat-infested hotel rooms jammed with beds are never able to crawl about the floor, which is the first stage in learning to walk.

The medical studies of children living their early years without a home are concluding that homelessness has an immediate and, in all likelihood, a long-term impact on these youngsters' physical and mental health. The physical health problems of these children have only recently been observed and reported by medical researchers and practitioners.

--Infants born to homeless mothers in New York City are twice as likely as housed children to die or be born with low birthweight.

--Homeless children are in poor health compared to housed children. Homeless children in Seattle are four times as likely to be in poor health than housed children.

--Homeless children suffer from the same type of acute and chronic illnesses that housed children experience except with more prevalence and severity.

--Homeless children are less likely to have been immunized.

--Substance abuse, both drug and alcohol, is being observed in children as young as 11 and 12.

The psychological damage resulting from homelessness can be devastating. Three-year olds who should already be speaking in

full sentences remain silent. The researchers, clinicians and educators who work with homeless children observe clinical depression, delayed development of language and motor skills, intense fear of being separated from their parents, an inability of young children to bond with their mothers and a general failure to thrive. The long-term effects of homelessness on children's mental health and ability to function in society has not yet been documented, but one can reasonably surmise that, unless the period of homelessness is brief and/or effective therapeutic help is provided, these children will experience major difficulties functioning in society.

Virtually nothing is being done nationally to reverse the emotional damage and developmental impairments of homeless infants and toddlers before they reach school age to insure that their future abilities are not permanently compromised. There is a growing number of child care programs serving homeless children across the country, but, by and large, they do not provide more than play and meals. In order to reverse the deleterious effects of homelessness on pre-school children, therapeutic child care should be provided--such as Headstart--to identify developmental delays, emotional problems and learning disorders, and help the children gain age-appropriate functional skills. Their parents should be given every opportunity and encouragement to participate in parenting education classes to improve and enrich the home environment.

Most public and private efforts on behalf of the homeless have focused, instead, on providing crisis assistance. A comparable initiative, however, has not yet begun to eliminate homelessness and the reasons for homelessness.

Rehousing homeless families and preventing others from reaching the streets is the only way to end homelessness. New housing development, however, is not enough. It must be linked to the creation of an accessible, non-traditional system of health, education and social services to enable these homeless parents and children to regain or achieve for the first time normal life skills.

Multi-problem families should receive case management services once they are rehoused to assist them in building a support network and to access services in their new communities. Moreover, in communities where significant numbers of homeless families have been rehoused, local service programs such as day care centers, schools and health clinics must be enriched in order to address the short- and, in some cases, long-term physical and emotional problems of these families.

Based on the recommendations in my report, the Robert Wood Johnson Foundation and the Department of Housing and Urban Development are jointly funding a demonstration project to provide 1,200 families in eight cities with service-enriched permanent housing. Applications are now being sought and awards will be made in early 1990.

Without housing and supportive services, the disrupted families, as well as the severely dysfunctional ones, will probably never regain a foothold in our society. With the right support services and health care, many of these families can be stabilized and integrated into their new communities. The best incentive for integrating services into housing development is the opportunity to help the children, who have often lived through war-like conditions, to overcome the trauma and developmental delays occasioned from months or years of the most profound deprivation.

While hundreds of millions of dollars are beginning to be allocated for the bricks and mortar costs of rehousing people, no comparable effort is being launched to provide for the health and social service needs of these families. This approach is short-sighted. When these physically and mentally damaged children grow up, they will place an even greater strain on our society. Public and private resources must be found to design, develop and implement programs to help these children and their parents now.

Senator ROCKEFELLER [presiding]. Dr. Boxhill.

STATEMENT OF DR. NANCY A. BOXHILL, PSYCHOLOGIST, SOCIOLOGIST, AUTHOR, AND COMMISSIONER, FULTON COUNTY, GA, AND ADMINISTRATOR OF SHELTERS AND TRANSITIONAL HOUSING FACILITIES FOR HOMELESS WOMEN AND CHILDREN IN ATLANTA, GA

Dr. BOXHILL. Thank you, and thank you for having all of us in such a caring way. It has been a good experience so far.

I want to talk to you a little bit about what the day is like for many homeless children. Let me start there by saying that homelessness for children means that every child, no matter how small, must carry a portion of his or her family's belongings everywhere, every day, all day.

Homelessness means that there are no toys, no special items to hold onto, to call your own or to root yourself.

In public night shelters, the day begins at about 5 a.m. when sleep and rest-broken children awaken in large dormitory spaces, surrounded by strangers, and mothers groom and dress their children, vying for space with the one or two sinks or toilets that are available.

Early morning is not a pleasant time of day. By 6 a.m., mothers and children must be packed and ready to leave the shelters. With or without breakfast, children stand on street corners in darkness and all kinds of weather, often unsupervised, waiting for transportation to a day shelter, a warm lobby or, if they are lucky, to school. But homeless children do not have tokens. For many them, the day begins with a long day's walk to nowhere, or to anywhere.

Often as a kindness in our city, police vans pick up our children and take them to school, and 6 and 7 and 8-year-olds, saved from the morning darkness, only to find a darkness of a different kind inside the back of a paddy wagon.

Night shelters open at 6 or 7 p.m., and finding a safe place or anyplace to play after school and before the shelter opens is a formidable task for a 7-year-old on city streets.

Twenty-four-hour shelters offer only a bit more comfort. School-age children devise many ways to arrive back at their homeless shelters undetected by their schoolmates who live in homes nearby. The daily emotional struggles and dilemmas of being homeless are intense and difficult and inappropriate for young children. I think that is what Bernice was saying when she was talking about "torture"; that word stuck with me. But there is little time to rest, there is little time to find safety, there is inconsistency, and bedtime brings no rest. Bedtime brings to guarantees of sleep and no promise of a different tomorrow.

America's homeless children are not attending school regularly. They don't have the appropriate documents and are refused enrollment despite the educational component of the McKinney Act. In neighborhood public schools, often it is because they did not return last year's books, so they are not enrolled in the school. Still others are sent home because they are inappropriately dressed. Many adolescents who are homeless just don't go to school as a way of avoid-

ing the taunts and jeers of their schoolmates—we heard some of that today.

America's homeless children spend each day worried about tomorrow. They are robbed of the most basic and essential element of childhood, which is reliable, predictable, safe routines. These children are ambiguous about tomorrow and unsure of unfolding events.

I don't belong to the group of psychologists who want to study the long-term effects of homelessness on children. The effects of homelessness on children are immediate. From the instant the lives of children are disrupted by the lack of a home, the effects of homelessness are seen. Parent-child bonding is affected because there are no private moments.

Intuitively understanding the need for special moments for privacy and safety, mothers make do in sad yet special ways. On a recent visit to a shelter for homeless women and children, I observed a mother with her two children, both under two years of age, lying on a single bed, totally submerged under sheets that had been fashioned into a tent. There was a tiny space through which air and noise and the eyes of strangers could intrude. Each time a stranger walked by, the mother would close that open space even more. As I stood near this bed which had become a tent, I heard the mother talking to her children about their life and what was happening to them.

This creative mother constructed a barrier which for a moment at least could exclude the peering view, judgments and interruptions of passing, unrelated strangers. She had carved out the necessary space to ensure a private moment during which she could connect with her children.

Homeless children often lose their sense of safety, security, self-esteem and, perhaps most important, their sense of belonging, and this does not bode well for soon-to-be adults whom we hope will be contributing members of our community, for how does one prepare to contribute to a community to which there is no sense of connecting or belongingness?

These adversities can be overcome, and they are overcome—but at what cost and by what means? Should the energy of childhood be spent overcoming childhood? The effects of homelessness are discernible and avoidable, and the remedy is housing. That is what the remedy is—not daycare, not special kinds of daycare. It is housing.

Allow me to conclude with one last compelling vignette. The routine emptiness I recount is alarmingly representative. I know of a small boy who sat on a park bench outside an office window all day, every day, for more than a week. He sat there, making patterns on the ground with his feet and making circles in the air with his arms. He sat quietly. He watched the people, and he wondered where they had to go; and he watched the pigeons, wondering where they had to go.

At the end of the day, his mother would come, and they would sit together for a while before leaving. After about the tenth day, my friend went down from the office building to ask him who he was and what he was doing there every day. He said that he lived in a shelter. His mother brought him to this bench every morning

when the shelter closed, and he waited there while she looked for work and a place to live. In the evening, his mother would return, and they would wait there until 6 p.m. when the shelter opened and they could go inside.

I call these children, Senators, the watchers and the waiters. They are watching us, and they are waiting on our response. What will it be?

Thank you.

Senator DODD. Thank you very much.

[The prepared statement of Dr. Boxhill follows:]

PREPARED STATEMENT OF DR. NANCY A. BOXHILL

ALL OVER AMERICA, IN OUR CITIES AND RURAL AREAS, CHILDREN ARE LIVING IN CARS, CARD-BOARD BOXES, ABANDONDED BUILDINGS AND SHELTERS. IN FACT, IF WE FOCUS ON THE LIFE STYLES OF THESE CHILDREN WE FIND THAT AMERICA SERVES NOT AS THE HIGHEST STANDARD OF LIVING TOWARD WHICH NON-INDUSTRIALIZED COUNTRIES STRIVE - RATHER FAR TOO MANY OF AMERICA'S CHILDREN ARE DANGEROUSLY CLOSE TO A LIFE STYLE WHICH MIRRORS NON-INDUSTRIALIZED COUNTRIES. LIVING ON THE STREETS IS LIVING ON THE STREETS NO MATTER THE SOVEREIGN BOUNDARIES.

AMERICA'S HOMELESS CHILDREN SPEND MOST OF THEIR DAYS UNCERTAIN. AMERICA'S HOMELESS CHILDREN ARE NOT ATTENDING SCHOOL REGULARLY. THOSE WHO LIVE IN TEMPORARY SHELTERS OR EMERGENCY HOUSING, OFTEN LACK THE APPROPRIATE DOCUMENTS (INNOCULATION RECORDS, BIRTH CERTIFICATES) AND ARE REFUSED ENROLLMENT IN NEIGHBORHOOD PUBLIC SCHOOLS. THEY MAY LACK THE CAR FARE OR TRANSPORTATION ENABLING THEM TO REMAIN IN THEIR ORIGINAL SCHOOL, SO THEY JUST DON'T GO. OTHERS ARE DENIED ATTENDANCE BECAUSE THEY HAVEN'T RETURNED SCHOOL BOOKS OR PAID FOR LAST YEARS LOST BOOKS. STILL OTHERS ARE SENT HOME FROM SCHOOL BECAUSE THEY ARE INAPPROPRIATELY DRESSED. SADLY, MANY SCHOOL-AGED ADOLESCENT CHILDREN SIMPLY REFUSE TO ATTEND SCHOOL, WANTING DESPARATELY TO AVOID THE TAUNTS AND STARES OF THEIR SCHOOL MATES AS THEY WALK TO AND FROM THE SHELTERS AND HOTELS.

AMERICA'S HOMELESS CHILDREN ARE NOT HEALTHY. THEY DO NOT EAT REGULAR OR BALANCED MEALS. THEY ARE VULNERABLE TO AILMENTS RELATED TO POVERTY AND ENVIRONMENTAL EXPOSURE. THUS, DEVELOPING CHRONIC HEALTH PROBLEMS. THESE CHILDREN SPEND COUNTLESS IDLE HOURS IN PUBLIC EMERGENCY ROOMS OR CLINICS WAITING TO RECIEVE TREATMENT FOR ACUTE AILMENTS. OFTEN MEDICATION AND BED REST OR RESTRICTED ACTIVITY ARE PRESCRIBED, BUT THERE IS NO RESTING PLACE FOR THESE CHILDREN. WHERE THERE ARE BEDS, THEY ARE NOT ALWAYS CLEAN, QUIET OR WARM. THERE ARE NO RESTRICTED AND SAFE ENVIRONMENTS, FOR THEY LIVE IN OPEN PUBLIC SPACES.

AMERICA'S HOMELESS CHILDREN SPEND EACH DAY WORRIED ABOUT TOMORROW. THEY ARE ROBBED OF THE MOST BASIC AND ESSENTIAL ELEMENT OF CHILDHOOD - RELIABLE, PREDICTABLE, SAFE ROUTINES. THESE CHILDREN ARE AMBIGUOUS ABOUT TOMORROW - ABSOLUTELY UNSURE OF UNFOLDING EVENTS. THEIR CONFIDENCE IN THEIR PARENTS' ABILITY TO NEGOTIATE THE LARGER SOCIETY IS SHAKEN. THEY OFTEN INTERNALIZE A SENSE OF BEING ADRIFT.

I DO NOT BELONG TO THE GROUP OF PSYCHOLOGIST WHO WANT TO STUDY THE LONG TERM EFFECTS OF HOMELESSNESS ON CHILDREN. THE EFFECTS OF HOMELESSNESS ARE IMMEDIATE. FROM THE INSTANT THE LIVES OF CHILDREN ARE DISRUPTED BY THE LACK OF A HOME, EFFECTS OF HOMELESSNESS ARE SEEN. PARENT/CHILD BONDING IS AFFECTED. THERE ARE NO PRIVATE MOMENTS. EVERY ASPECT OF DAILY LIFE AND CHALLENGES OF GROWING UNFOLD IN FULL PUBLIC VIEW AND SCRUTINY. INTUITIVELY UNDERSTANDING THE NEED FOR

PRIVACY, BONDING TIME AND SAFETY, MOTHERS MAKE DO IN SAD YET SPECIAL WAYS. ON A RECENT VISIT TO A SHELTER FOR HOMELESS WOMEN AND CHILDREN, I OBSERVED A MOTHER WITH HER TWO CHILDREN (BOTH UNDER TWO YEARS OF AGE) LYING ON A SINGLE BED TOTALLY SUBMERGED UNDER SHEETS THAT HAD BEEN FASHIONED INTO A MAKE-SHIFT TENT. THERE WAS A TINY SPACE THROUGH WHICH AIR AND NOISE AND THE EYES OF STRANGERS COULD INTRUDE. EACH TIME A STRANGER WALKED BY, THE MOTHER WOULD CLOSE THAT TINY OPEN SPACE EVEN MORE. AS I STOOD NEAR THIS BED WHICH HAD BECOME A TENT, I HEARD THE MOTHER TALKING TO HER CHILDREN ABOUT THEIR LIFE AND WHAT WAS HAPPENING TO THEM. THIS CREATIVE MOTHER CONSTRUCTED A BARRIER WHICH, FOR A MOMENT AT LEAST, COULD EXCLUDE THE PEERING VIEW, JUDGMENTS AND INTERRUPTIONS OF PASSING AND UNRELATED STRANGERS. SHE HAD CARVED OUT THE SPACE NECESSARY TO ENSURE A PRIVATE MOMENT DURING WHICH SHE COULD CONNECT WITH HER CHILDREN.

HOMELESS CHILDREN OFTEN LOSE THEIR SENSE OF SAFETY, SECURITY, SELF-ESTEEM AND PERHAPS, MOST IMPORTANT, THEIR SENSE OF BELONGING. THIS DOES NOT BODE WELL FOR "SOON-TO-BE -ADULTS" WHOM WE HOPE WILL BE CONTRIBUTING MEMBERS OF OUR COMMUNITIES. FOR HOW DOES ONE PREPARE TO CONTRIBUTE TO A COMMUNITY TO WHICH THERE IS NO SENSE OF CONNECTION OR BELONGING?

IT IS MY PRAYER THAT THESE LOSSES ARE TEMPORARY. LIKE MOST ADVERSITIES - THEY CAN BE OVERCOME . . . BUT, AT WHAT COST, AND BY WHAT MEANS? SHOULD THE ENERGY OF CHILDHOOD BE

SPENT OVERCOMING CHILDHOOD? THE EFFECTS OF HOMELESSNESS ARE DISCERNABLE AND AVOIDABLE. THE REMEDY IS HOUSING.

ALLOW ME TO CONCLUDE WITH ONE LAST COMPELLING VINGETTE. THE ROUTINE EMPTINESS I RECOUNT IS ALARMINGLY REPRESENTATIVE. I KNOW OF A SMALL BOY WHO SAT ON A PARK BENCH - OUTSIDE AN OFFICE WINDOW ALL DAY EVERYDAY FOR MORE THAN A WEEK. HE SAT THERE MAKING PATTERNS ON THE GROUND WITH HIS FEET, MAKING CIRCLES IN THE AIR WITH HIS ARMS. HE SAT QUIETLY. HE WATCHED THE PEOPLE AND HE WATCHED THE PIDGEONS, WONDERING WHERE EACH HAD TO GO. AT THE END OF THE DAY HIS MOTHER WOULD COME AND THEY WOULD SIT TOGETHER FOR A WHILE BEFORE LEAVING.

AFTER THE 10TH DAY, MY FRIEND WENT DOWN FROM THE OFFICE BUILDING TO ASK HIM WHO HE WAS AND WHAT HE WAS DOING THERE EVERYDAY. HE WAID THAT HE LIVED IN A SHELTER, HIS MOTHER BROUGHT HIM TO THIS BENCH EVERY MORNING WHEN THE SHELTER CLOSED AND HE WAITED THERE WHILE SHE LOOKED FOR WORK AND A PLACE TO LIVE. IN THE EVENING HIS MOTHER WOULD RETURN AND THEY WOULD WAIT THERE UNTIL 6:00 PM WHEN THE SHELTER OPENED AND THEY COULD GO INSIDE.

I CALL THESE CHILDREN THE WATCHERS AND THE WAITERS AND THEY ARE WATCHING US - WAITING ON OUR RESPONSE. WHAT WILL IT BE?

Senator DODD. Dr. Ciborowski.

STATEMENT OF DR. JEAN CIBOROWSKI, DIRECTOR OF EDUCATION SERVICES, BOSTON CHILDREN'S HOSPITAL-SCHOOL FUNCTIONS CLINIC, BOSTON, MA

Dr. CIBOROWSKI. Before I begin and before I forget, I wanted to respond to your comment earlier about homeless students and achievement. I just wanted to throw out that the length of homelessness and certainly the age upon which children become homeless are real factors to consider, and I am going to address that a little bit in what I am going to say.

Senator DODD. A guidance counselor or a teacher should not draw the immediate conclusion that because a child is in a homeless environment, that child automatically has problems.

Dr. CIBOROWSKI. Certainly.

Senator DODD. The problem is, you see, I think those of us who deal with these issues, there is regrettably an assumption that automatically—I think we ought to be sensitive to the problem, but I think we also ought to be careful not to draw immediate conclusions; and you agree with that?

Dr. CIBOROWSKI. Yes, absolutely. Teacher expectations is a very important influence on learning. And I am going to be talking a little bit more about that in my short speech. I don't think I have ever had so many things to say in such a short period of time, so I'm going to get right to it.

I am going to be talking from the Boston perspective about the Boston homeless children. I am a member of a dynamic team of physicians, nurse practitioners and educational specialists who go out to motels situated north of Boston—Revere, Chelsea, Peabody, Mauldin, for those of you who know the area. This is where Boston families are placed. Many of these families have two to three children, and many of these children are under the age of 6.

We go out in a medical mobile van—not as big as Dr. Redlener's in New York—but we do provide primary health care on the spot in the motels, and I provide educational services. What I do is I try to—while the physicians are doing lead poison screening or immunizations or whatever primary care is needed—I am there to help the moms enroll the kids in the schools, especially the schools right around the corner from the motels, and then try to provide for the kids in what we call an educational prescription. It is, if you will, sort of an "educational passport" that describes the educational needs of the homeless student, and it is intended for all the teachers who may work with the child wherever the child is bounced.

However, most of the kids in our motels are under the age of 6 and of preschool age. So I am going to try to make three points in the next 5 minutes.

The first point will be our observations about the conditions of homelessness and how the homeless environment is affecting the cognitive development of preschool children.

The second point I want to make is I want to give you some preliminary results of a more systematic study where we really looked closely at how these little kids are learning and growing in the homeless environment.

And the third point, of course, is the implications.

I'd like to tell you the first point by telling you about Samantha, who is a 4-year-old in one of the motels we work in.

My first sight of Samantha was when she was fleeing across the parking lot of the motel, trying to dodge and 18-wheel tractor-trailer truck. This motel is a favorite spot for tractor-trailer truckers, because it has a huge parking lot, and the guys who go from Maine to New York and from New York up to Maine love to stop, so any given night you might see 50 trailer trucks parked in this motel parking lot.

At any rate, I got to know Samantha by spending time in her motel room with her mom and her two baby brothers. We took a very close look at the condition of her small living environment—12-by-10 feet, Room Number 12—and this was supposedly the place she was going to grow and learn all the necessary precursors for more formal school learning.

I looked more closely and found no toys, a few books, and certainly no space to play. There was no one to read to Samantha, even though she was desperate for attention and hungry for learning and hungry for language stimulation. At the same time, she was unruly and disruptive, but terribly interesting and, as I said, very hungry for learning stimulation.

There was no opportunity in Samantha's environment for quiet. There was no solitary and reflective play that was going on. And this, we know through child development research, is a very important part of a child's social and emotional growth.

We noted, too, that when we looked very carefully at what Samantha was doing, she wasn't interacting in play and exploration necessary for physical and emotional growth. Instead, we saw her doing basically three things. She was impulsively running and doing other kinds of oppositional behavior. She was sitting in front of the TV, passively, for long hours. Or, unbelievably, she was being thrust into the premature role of surrogate mother to her two baby brothers.

And then, after several months, we realized that this was very typical of many of the families and children living in these motels north of Boston.

So we have certainly had a bird's-eye view of how the condition of homelessness is affecting Samantha's and other children's like her growth and development.

But to get to my second point, we decided to take a more systematic look, using some scales of children abilities, to find out the effects of homelessness on cognitive growth. Preliminary findings are in, and they are mixed, and there is good news and bad news.

The good news is that our homeless preschool children are scoring well within the low-average to average range of cognitive functioning. This means they are capable, they have strengths, they have good core equipment with which to learn, and the potential to do well in school.

But now the bad news. The homeless environment is wreaking havoc with their fragile strengths and abilities. Despite all of these children's eagerness to be tested, more than half of them could not pay attention for more than 5 minutes. They couldn't focus. They were distracted. They couldn't do such simple things as put a

three-piece puzzle together or imitate a simple block design. They had difficulty copying simple shapes like circles, lines, and the letter "L". And moreover, many of these children showed very weak signs of——

Senator DODD. How old were the children?

Dr. CIBOROWSKI. Three, 4 and 5; preschool age.

Many kids had difficulty understanding verbal information.

So this brings me to my third point. What are the implications of these findings? We know that schools reward children who are curious, who can sit, who can listen, who can follow directions as well as engage in harmonious activities with other kids. But this research is showing that many homeless children, preschool children, will experience failures and frustrations even in the tender first years of their early educational careers. And for those homeless children already of school age—and I need to say this—there may be as many as 750,000 homeless kids who are not going to school at all, and for those who do go to school, do you know that chances are significantly greater for the homeless kid than for his or her classmate that he will repeat a grade; that he will develop a pattern of failure and under-achievement; that he will score below grade level in the standardized math and reading tests that we give to kids every few years to determine if we are still a Nation at risk; and that he or she will be highly represented in the special education rosters if they can get to school and be cored. However, special education, as you know, is twice as expensive as regular education.

So in conclusion I would like to say that any child, in my opinion, with 14 years as an educator and 8 years as a classroom teacher and this last experience in the motels, I can seriously say that any child subjected to the conditions of homelessness would exhibit serious delays and disruptions in their learning and development. And this, as it has been brought out previously, could happen to any child.

Research is showing that children are the most resilient to the negative effects of frustration and failure when they are young. The crucial time to capitalize on their strengths and abilities is before they are unable to resist the gruesome effects of poverty.

Now let me just tell you about Samantha. Samantha is finally in a permanent home. On the first day of school, she proudly brought her educational passport with her, and we know it gave her teacher additional guidance and support in finding effective ways to teach Samantha. Still her teacher tell us Samantha is having a hard time sitting still, she bothers her neighbors, and she is not able to understand simple directions. She is having a hard time learning her colors, and she has been disciplined four times already this year, and it is already October.

Well, we will continue to work with Samantha's Mom and her teacher for as long as we can. And now that she has a home, hopefully her support systems will be strengthened. But we know that the effects of homelessness will cast a long shadow into her early life and her ability in school.

I'll stop here, but I do have three recommendations that relate to homeless children and education that I would be happy to leave with you.

Senator DODD. Are you going to keep them from me?

Dr. CIBOROWSKI. No, no, not at all. I did not want to hog the microphone here.

Number one—and this is on behalf of Samantha and the other kids in the motels—long-term support for permanent enriched housing that will emphasize strengthening the link between home and school to prevent the cycle of under-achievement from beginning in the first place.

Second, reauthorization of McKinney funds, particularly to expand the role of the State Department of Education's Office for the Children of the Homeless. This office, especially in Massachusetts, is in a strategic position to reach the local schools and classroom teachers about better ways to teach these children as well as to address the issue of preschool education for children of displaced homeless families.

And the last recommendation would certainly be more support for quantitative and qualitative research to continue to inform and guide or thinking about creative intervention and cost-effective solutions.

Thank you very much.

Senator DODD. You did that all in one breath, too, Doctor. Thank you.

[The prepared statement of Dr. Ciborowski follows:]

The Children's Hospital • Boston

300 Longwood Avenue, Boston, Massachusetts 02115 • (617) 735-6000

PREPARED STATEMENT OF DR. JEAN CIBOROWSKI

Learning and Developing: Children of Extreme Poverty
Jean Ciborowski, Ph.D

Background Information

The number of homeless children and their families is not precisely known. That number is hidden within the broad estimate of 250,000 to 3,000,000 homeless persons nationwide. The 1989 Children's Defense Fund Report (Mihaly, 1989), states that homeless families with children are the most rapidly growing segment of the homeless population and further, make up at least one-third of the entire homeless population. The Institute of Medicine, (1988) estimates that 100,000 children go to sleep homeless every night.

Given the extreme disruption of family and community life, and overwhelming poverty that results by the loss of a home, it is painfully clear that those who are most vulnerable are the children. They will continue to be highly represented among school underachievers and failures unless the powerful cycle can be broken, in my opinion, during the preschool and early elementary school years.

School Age Children and Youth

A close look at estimates of homeless children and school attendance reveals that 30 to 57 percent or as many as 750,000 children and youth do not regularly attend school or do not go to school at all (Center for Law and Education, 1987; National Coalition for the Homeless, 1987; Rafferty, 1989). And even if these children and youth make it to school, chances are significantly better for the homeless student than for his or her classmate that:

- he or she will repeat a grade;
- he or she will develop a pattern of failure or underachievement;
- he or she will score below grade level in the basic skill, math and reading tests
- he or she will be highly represented in the special education rosters (Bassuk & Rosenberg, 1988; Maza & Hall, 1988); participation in special education could be viewed as good news until one reads the New York city data that describe how programs designed for the learning disabled,

the second language learner as well as the gifted and talented are often disrupted and sometimes ceased for students who become homeless (Rafferty & Rollins, 1989).

In order to determine how to break this horrible cycle of school underachievement and failure, we look back at what happens before these students reach school age and examine how they are developing and learning as toddlers.

Project Better Health : Pre-School Children

For the past eleven months, a team of medical and educational specialists from Boston Children's Hospital have been spending time in 5 motel parking lots north of Boston in a fully equipped medical mobile unit (RV..affectionately referred to as Bertha). These motels provide emergency shelter to approximately 125 families, many of whom are Boston families. Most of these families include 2 or 3 children, and most of the children are under the age of 6.

Samantha was one of these children; she shared one room with her Mom, and two brothers, who were 6-months and two years old. My first glance at 4 year old Samantha was fleeting, as she streaked by the front of a trailer truck lumbering through the huge parking lot that made her temporary motel home a favorite among New York to Maine truckers. As so many of the children her age we see, she was disinhibited and unruly, and at the same time, desperate for attention and hungry for language and learning.

Unfortunately, a closer look at Samantha's environment where she was expected to grow and learn the precursors for school revealed not surprisingly, a dismal picture.

There was a sparsity of books and toys and certainly no space where she could play. There was no one to read to Samantha or answer or encourage her endless questions.

There was virtually no opportunity and space for quiet, solitary and reflective play, an important part of Samantha's social and emotional growth.

We noted Samantha's mother unable to engage her in natural and easy talk while bathing her, tying her shoes, or buttoning her coat; Instead, we observed a young mother too stressed and forever worried about her Section - 8 certificate to interact with her children other than for disciplinary reasons; her screams at Samantha to get out of the way of the trailer trucks [illegible] the motel management threatened to evict the

family because of Samantha's behavior.

We noted too that Samantha was not engaging in interactive play and exploration necessary for healthy physical and emotional growth. Instead, confined to motel living for 14 months, she did not go to school, a picnic, a party or park. Essentially, we observed her engaging in 3 basic activities: impulsive running and acting out, sitting passively in front of the TV, or being thrust into the uncanny role of surrogate mother to her two baby brothers.

Previous studies have identified the conditions of homelessness as causing developmental lags among the children, (Bassuk & Rosenberg, 1988), Because this research used a screening device, we decided to take a more in-depth look at how homeless preschool children were developing and learning. Using a measure that is well constructed and used on populations of various socioeconomic groups, the hour long assessment involves enjoyable game like activities that attempt to measure a child's cognitive development.

While our results are preliminary, some patterns are emerging. There is good news and bad.

The good news is, for the most part, these children are scoring well within the low average to average range of cognitive functioning. They also seem to be developing well in the gross motor area. This means they are capable; they have good core equipment with which to learn and the potential to do well in school. But more importantly, it means that now is the crucial time to capitalize on their strengths and abilities before they are unable to resist the gruesome effects that poverty can have on learning and self esteem.

The bad news is that the environment is wreaking havoc with their strengths and abilities. Despite their eagerness to participate and their hunger for structured play, more than half of the children tested exhibited problems paying attention and focusing to the game-like tasks. In addition, they had difficulty with reasoning and problem solving activities such as completing simple puzzles, imitating simple block designs, copying simple shapes and being able to tell when things are alike and when they are different. Moreover, many children showed signs of weak receptive language skills or the ability to understand verbal information.

Because the length of homelessness among the children tested ranges from 3 months to 2 years, and we have not been able to compare them to a control group of other children in poverty who live in homes, it is difficult to determine the degree to which the condition of homelessness is contributing to their gaps in learning.

I feel confident in saying however that as a result of my experience with these children, eight years as a classroom teacher and 14 years in the educational field, that any child would exhibit delays and disruptions in learning if subjected to the conditions of homelessness.

We visited Samantha now in her first month of kindergarten and in a home for the first time in two years. When we asked her teacher how she was doing, she responded:

"Samantha has a hard time sitting still; she bothers her neighbors and she is not able to understand and follow simple directions. She is having a hard time remembering her colors, and she has been disciplined several times already this year."

In time, I hope Samantha will begin to learn; we know from previous research that children are most resilient to the negative effects of frustrations and failure when they are young. And now Samantha has a home where support systems can be reestablished and perhaps even strengthened so that Samantha never becomes homeless again.

I also hope that the community finds ways to make the link between home and school a number one priority so that the cycle of failure and underachievement can be broken before it can begin.

Finally, I have a quiet daydream that Samantha will grow up to be the CEO of her own trucking company and use her power and influence and incredible energy to wage war on poverty and homelessness.

References

Bassuk, E.L., & Rosenberg, L. (1988). Why does family homelessness occur? A case-control study. American Journal of Public Health, 78, (7), 783-788.

Center for Law and Education. 1987. Cambridge, Ma.

Institute of Medicine. (1988). Homelessness, Health and Human Needs, Washington, D.C.: National Academy Press.

Maza, P.L. & Hall J.A. (1988). Homeless Children and their Families: a Preliminary Study. Washington, DC: Child Welfare League of America.

Mihaly, L. (1989). Beyond the Numbers: Homeless Families With Children, Washington, D.C.: Children's Defense Fund.

National Coalition for the Homeless. (1987). Broken Lives: Denial of Education to Homeless Children, Washington, DC: Advocates for Children of New York, Inc.

Rafferty, Y. (1989). Developmental and Educational Consequences of Homelessness on Children and Youth, paper presented at the Johns Hopkins University Institute for Policy Studies, National Conference on "Homeless Children and Youth," Washington, DC.

Rafferty, Y., & Rollins, N. (1989). Learning in Limbo: The Educational Deprivation of Homeless Children, New York: Advocates for Children of New York, Inc.

Senator DODD. Just quickly, before we get to the last witnesses, on next year's reauthorization of McKinney, I certainly intend to focus as much attention as we can on the family and children aspects of this, and we are going to be asking a lot of you who have been here to help us frame it in an intelligent way.

I get a little nervous when money becomes the only question, and we have really got to do it right on this thing. So we want to begin now, and obviously, part of this is to get ready for that, to start to at least get people aware of the depth of the problem here, particularly when you start looking at the numbers, Doctor, that you talked about, and the people who are on that cusp, who could easily end up in the category that we saw Lorin and her family earlier, who are working one day, and then because of circumstances are not on another, and don't fall into the dependent, the addict or the alcoholic, or the person who faces some sort of a mental disability of some kind, other than the ones just mentioned.

Dr. CIBOROWSKI. Senator Dodd, one of the things you might focus on in McKinney is that there is no money for permanent housing for families. It is only for disabled people.

Senator DODD. That's one of my questions. I'll give you the question ahead of time—why is it we are willing to put more money into foster care—we will pay a family to separate, and not give it the same amount of assistance to keep it together. That just doesn't make any sense to me.

Mr. Johnson and Ms. Dubrow.

STATEMENT OF BRODERICK D. JOHNSON AND EVE L. DUBROW, ATTORNEYS, AND DIRECTORS OF HOMELESS CHILDREN'S TUTORIAL "PROJECT NORTHSTAR", WASHINGTON, DC

Mr. JOHNSON. Good afternoon Chairman Dodd and other distinguished members of the subcommittee on Children, Family, Drugs and Alcoholism. My name is Broderick DePorres Johnson. I am presenting this testimony along with, Eve Lynn Dubrow, who will be responding to your questions.

I am an attorney with the law firm of Wiley, Rein & Fielding, and Eve is an attorney with the law firm of Akin, Gump, Strauss, Hauer & Feld. We are on the Board of Directors of the Homeless Children's Tutorial Project, also known as Project Northstar, and we are honored to present this testimony on behalf of the tutors and children of the Project.

Project Northstar is a nonprofit corporation formed by a consortium of several groups: the Washington, DC chapter of Concerned Black Men, Inc.; the Coalition of One Hundred Black Women of DC, Inc., and an ad-hoc committee of young attorneys organized with the assistance of Dick Lynch, Special Projects Director of the American Bar Association. Project Northstar grew out of a collective concern for the plight of homeless children residing in shelters in this city.

The learning process during the short life of our program has been bilateral. Naturally, the children have learned a great deal. Eight-year olds have learned the alphabet for the first time. Nine-year olds have learned that Washington, DC is the Nation's Capital. And just as amazing, young African-American children, for

one of the few times in their lives, have been exposed to positive African-American role models—lawyers, doctors and business people. And, they've been introduced to complete strangers who care about them deeply, and who are, and will be, there to teach them, love them, and support them.

While the children have learned so much, so have we—the tutors. We have learned that many of the children lack the parental support and encouragement and, therefore, have little reinforcement for what they learn. Because their clothing is often old and dirty, they are stigmatized and taunted by their peers. Many of the children have initially told their tutors that they attend school every day, only later to confess that they attend school "most of the time", "sometimes", and some even say "never".

There are no school buses provided to transport the children to and from school; thus many elementary school-aged children must walk three-quarters of a mile across some of the city's most dangerous intersections to attend school. Many of the children are not permitted to attend school because they have not received immunizations or proper vaccination records are lacking.

The children are very open to learning, but many need intensive help—they can sing the alphabet, but do not understand that "LMNOP" isn't a single letter. When they sit down to learn, they must blockout shootings and other acts of violence they witness daily.

One 8-year old told us that he doesn't like living at the Capital City Inn because, in his words, "people shoot each other, and fires start and people die in those fires." Another child was abused by a drug dealer who used him to get back at the child's mother for not paying her drug bill. Other children have told us that they refuse to walk in certain areas of the shelter, for fear they will be accosted by drug dealers who will pressure them to hustle their drugs.

One of the main purpose of our testimony today is to place faces on statistics. Our children should not be merely counted; please listen as they speak to you through their letters, artwork and through us, their tutors and advocates. Their stories are both sad and encouraging.

Eight-year old Corey is like many of the younger elementary school-aged children at the Capitol City Inn who must walk three-quarters of a mile to get to school. There is no bus to take Corey to and from school; nor is there a crossing guard to ensure that he reaches the other side of the street safely. One morning, Corey was struck by a truck on his way to school. Miraculously, and probably due to Corey's resilience and survival skills characteristic of Corey and many other children like him, he received only a glancing blow and was released from the hospital the following day. The hospital staff told us that Corey was lucky he wasn't killed. We, too, were very lucky. Despite near tragedies like Corey's, there still is no bus or crossing guard to ensure that these children arrive at school safely.

Orchise is a typical 14-year-old girl—full of life, questions, and dreams of the future. She wants to become an attorney. She has the ability to become an attorney, she simply needs the opportunity. She is an honor roll student despite having lived at the Capital City Inn for several months. Orchise does what a growing number

of children do once they move from the shelter—each Monday and Tuesday afternoon, she travels on several Metro buses across the city to the Capital City Inn so she can ride the tutorial bus. She has a special bond with her tutors. They see to it that Orchise dresses for school in clothing which does not set her apart from her classmates. Her tutors are typical of many other Project Northstar tutors who have established tremendous bonds with their students. Orchise's tutors extend themselves beyond tutoring and intervene at the most basic levels of her life.

Finally, there is the trio of brothers—Gary, Damien and Brandon. They are bright, active boys who have been in the Project since its inception. They attend each Monday and Tuesday tutorial session, and they live at the Capital City Inn with both of their parents. One of the parents is always present to greet their sons when they return to the Capitol City Inn after the tutorial. Oftentimes their tutors instruct them in a closed circle, thereby fostering and strengthening their bond as brothers. Damien is an excellent artist who created the motto for Project Northstar: "As a Rule, School is Cool." But as with all the other children in our program, we wonder what toll is exacted on these boys because they live in a homeless shelter. What psychological residue will the impact of living in a homeless shelter have on their characters?

Through Project Northstar, we have learned that talent and brilliance can survive life in a homeless shelter; but that homelessness is likely to destroy the spirit of even the most gifted child. As friends of the more than 250 children who have enrolled in the Project, we are outraged that bright, ambitious children—future lawyers, doctors and perhaps even Members of Congress—are systematically denied the opportunity to live in safe, clean homes conducive to normal childhood development. Furthermore, we are ashamed that in the Nation's Capital, children must risk their lives dodging between rush-hour traffic on New York Avenue to attend school. The pursuit of education should not be life-threatening.

In the final analysis, however, we remain hopeful, not depressed. For the fact that we have been able to work in a multi-racial endeavor for the best interests of these children is a testimony to the potential of this Nation. And we have experienced incredibly precious moments with the children. Priceless conversations with seven year-olds about how to keep a frog alive in a jar. Nine year-olds reciting times tables with speed and enthusiasm. Slap-stick three-legged races and messy egg tosses at the Project Northstar picnic. And relentless cheering for the Orioles on Cap Day at Memorial Stadium.

Project Northstar will continue to exist as long as children live in shelters and as long as any child must be comforted and nurtured after experiencing childhood in the nightmare of a decrepit, unsafe hotel room she must call home.

Thank you.

Senator DODD. Thank you very, very much for that testimony.

Ms. Dubrow.

Ms. DUBROW. I will be answering questions.

Senator DODD. OK. That was a joint statement. Thank you.

We thank all of you very, very much, and as I said at the outset, I thank you for coming.

First of all, we will take—I have read through them, and they are sad, they are moving, the are funny—the letters and the artwork and so forth—I do not know how the U.S. Printing Office will handle this as part of the record, but we'll see if we can't include all of these as part of the record of this hearing. I don't know how they will duplicate drawings of ghosts, but we'll challenge their creative abilities.

I want to again thank all of you for taking the time, and some of you coming some distance to be here and to participate in this hearing. I have a few questions here, and then would like to ask some of you maybe to comment on some of the things you have heard from others, so we can develop the record a little bit.

I was interested in the question of housing, and you brought it up, Cindy, in your comments. It occurred to me, because one of the issues that this subcommittee wants to get into is the whole issue of foster care and what is happening out there with the foster care programs across the country, all State-run, of course.

The Select Committee on Children in the House has done a lot of work on that already, and we hope to build on that, working with them, rather than duplicate. George Miller has done excellent work in that regard.

But here we have a system that will pay for a child to live with strangers—in a sense, almost lure them, induce them, in a way, because it is one way that that child at least may have some prospect of getting out of the situations you describe. But what a wretched system, one that will pay a family—but to lure the child or get the child out of that environment, and yet we don't have the resources to make it possible for that family to be together.

I wonder if you just might comment on that, since you raised it, and it was one of my questions, and give me some idea of what we may be talking about here in terms of comparative costs to the extent you have studied it.

Ms. FREIDMUTTER. What I have seen in New York City and other cities I visited for the Foundation is that there is money for shelters, there is money for transitional residences—still nowhere near enough for the number of people who need them—but there is not money for permanent housing. And certainly in terms of the Federal Government, there is very little money for permanent housing.

The McKinney Act—I, just for my State, helped prepare a number of applications—puts almost all the housing money toward transitional programs and virtually nothing for permanent housing, and the permanent housing can only go for single disabled folks, not for families.

So these children really are excluded from what every one of us here has said is really the basis for them getting back on their feet—a place to live.

Senator DODD. I think one of you pointed out, and I think it was very good—but they were talking about their family and how strong it is, and how they hang together through these things—and one of you pointed out, or several of you did, that that isn't always the case here, and we shouldn't necessarily assume that because we have two examples of children here who have come through a situation, and like Lorin, where families almost seem to get stronger in an adverse environment—how often do you see this specter of

foster care hanging over a family where you'd say that the only way this child is going to at least have some opportunity is if we place them in a situation where they go in a foster care environment? How much of a threat is that to a family in this situation?

Ms. FREIDMUTTER. From what we know in New York, children in foster care are there almost solely because of homelessness, not for other factors. So that in our city, it is a very severe problem.

I just want to add, Senator, about the housing—and I really was remiss in not saying it in my comments—as a result of the study, there is now a partnership between HUD and the Robert Wood Johnson Foundation to try to create more permanent housing for—and this is a very small number—but for 1,200 families around the country to try to provide what necessary services families need in permanent housing. The program was just announced about two weeks ago at a press conference by Mr. Kemp—again, a model; we need more than models, of course—but it is a Federal housing commitment toward permanent housing, and the Foundation is committing money toward trying to encourage the support systems for the people who move in. We hope that that will be a building block for further Federal action.

Senator DODD. Well, there will be a major effort on housing this year. Secretary Kemp is of course moving on one front. The Majority Leader here asked a group of us, under the leadership of Senator Cranston and the Task Force on Housing on which I am serving, to come up with some ideas, and I'll tell you right now, in the report that we've put together that was available for members of the task force today, permanent housing for the homeless is high on that agenda. Now, whether it ends up—it is one thing to be in a task force report, and to end up on the President's desk as part of a bill—there is a long road between those two events, but nonetheless it is on the agenda, and we hope to make it a part of it as well.

You have mentioned housing. Doctor, you of course have worked directly in trying to provide decent health care. We have already addressed to some degree here—but we don't seem to recognize the need to deliver a variety of services together, sort of a holistic approach dealing with the family. I wonder if you might comment on that and any ideas you have on how we might best address that at all.

Any ideas?

Mr. JOHNSON. I just want to say in terms of tutoring, we can't even tutor without taking a holistic approach. We have noticed in the tutoring sessions that children don't seem to be able to read things that are a little distance away from them, and we discovered that of the 150 children in the program, we haven't seen one child with a single pair of eyeglasses, which is shocking to think about.

In addition, we've got kids who come to the sessions with scrapes and the typical things you see children with, but they are infected in many cases. So we have had to go and find a first-aid kit. It is essential that there be a holistic approach on any level.

Ms. DUBROW. I'd like to add something to what Broderick just said. In addition to those things, we often see children who have been abused, and we don't have the facilities to deal with that, so we have to refer it out. On several occasions, we have taken kids back to the shelter at 9 o'clock at night, sat for a half-hour to 45

minutes before a social worker would even talk to us. An experience I had, the social worker said, "There is nothing we can do about it. This is something that needs to be looked at."

Another problem that has been alluded to is that these kids have no transportation to and from school. So what we are dealing with is 8-year-old Clifton who has never been to school before. We don't know that. We sit him down with a tutor, who has to teach him from the very beginning.

So when you are talking with reauthorization, it should be stated in there some provision for transportation, because the State is ducking this issue right now.

Senator DODD. Well, how do you do this? I mean, just give me some practical suggestions. I agree with everything you are saying. But how do you deal holistically with this situation? Do you have any thought about how you set up a structure or a system to deal with the tutoring, the abuse, the medical problems, obviously, the job training, child care issues, as a mother goes off and looks for a job, and yet the shelter closes down—what do you do? Is there any sense at all—yes?

Dr. CIBOROWSKI. I think the concept of enriched housing is important, and Cindy can speak to that.

Dr. BOXHILL. Can I respond?

Senator DODD. Yes.

Dr. BOXHILL. And I mean to be as respectful as I can be. I want to raise what may sound like a philosophical question but it is not intended to be so, and that is when we try to talk about coordinating services, we are talking about services to fix or mend people. And as I understand and work with homelessness every day, it is not the people who are broken and need fixing; it is the system, the housing system. We do not have housing.

Now, when we can put people in permanent housing—I don't mean to suggest that we will never again have health problems, because we will; we are going to have health problems that come with income levels, or environmental kinds of factors—but I personally—and I think that part of our question has to be locality-focused; what is being done with the $50,000 in Georgia for the education of homeless children is going to be spent to count the number of homeless children. So to just reauthorize that because it is working in Massachusetts—I can't even say it I am so intent here—is not going to do anything in Georgia.

So I really want us to move as carefully as we can. I want us to be very careful about how we use words and terms. I would urge that we do that. To talk about affordable housing, and as a local government official, we have just gone through an affordable housing study in Fulton County in Atlanta, Georgia, and our affordable housing model is going to be $50,000 to $60,000 a unit. That is not the group of people we are talking about here, but if we don't slow down and try to separate out some of our concepts, I think we will find ourselves a year or two down the road not having accomplished what we had hoped to accomplish.

The last point, again, may sound philosophical, but I don't intend it to be. That is, when we take the measures of who knows what, who has learned what, who is capable of doing what, particularly in terms of the children, my experience in learning as a psycholo-

gist, perhaps coming from a different perspective, is that people learn what is useful to them to know and what has meaning, and you want to use that knowledge or those facts in the larger world, and if you don't fit in the larger world, then it really doesn't make a difference whether you know that "LMNOP" is three, four, five, or no letters—which is not to suggest that the alphabet isn't important, but it is to suggest that learning occurs in a context around meaning. And that would bring me back full circle to I am not interested, as one person working with the homeless, in a different kind of daycare for these children, or coordination of services. I want them in homes. I have already paid once for them to go to the health department and get their inoculations as a taxpayer.

Senator DODD. I think you may have provoked a little discussion here.

Dr. BOXHILL. Good. I have a knack for doing that.

Dr. REDLENER. Your point, Senator Dodd, about the necessity for maybe looking at this whole problem a little differently, I think is very well-taken. I think that it is virtually impossible now to solve any of these problems, even individually, no less systemically, by forcing us to become categorical in our approach. I think we have to have some ways of overviewing what the needs are, and I think it needs to be done on a neighborhood basis, especially in the larger cities. There has been too much macro planning and categorization. We need to force these larger cities where the problems are so intense to take every, single neighborhood, neighborhood by neighborhood assault on these problems and look globally at what families need.

The problem is that the system has provided so little funds—and I don't mean to come back to the money issue--but the system has provided, relatively speaking, so little funds that the people that are providing services are playing a shell-game: You take a little from the drug money and you give it to health care; you take a little from the health care, and you give it to education. And all of us are tinkering with tiny amounts of money, and we are looking at half-billion-dollar Stealth bombers. It is just not fair, and it is not appropriate.

I think what we need as providers in order to set up these new models is for you to reorient the priorities of the spending of the public dollar. We are out of our minds with frustration about the fact that we ask for $64 million in the McKinney health funds; we'll probably get, after conference, maybe $40 million or $50 million. It is a tiny amount of money, and it is in competition with many other important needs that other people have. All of it is important. I think the whole pot needs to be fired up. There needs to be much better organization of where our priorities are. And finally, we need to have the authority to say—somebody is going to have to say at some point you can't spend $65,000 a year in New York City to put a family of three in a congregate shelter, when I have a father who comes to me with his kid and says, "If they gave me the money, I would (a) pay income tax and (b) renovate dilapidated apartment in New York City." Who has the authority to let him do that? They tell us that the emergency money for sheltering families is a different pot than the housing money, that you can't mix the two.

So I am ask you who can take the overview and has the responsibility and authority to change the basic way in which the system functions. I think that is what we all need to happen.

Senator DODD. Well, that's what the point of all of this is, so that we won't come around next year, and all of a sudden we'll have a contest here of who can offer more money, like we saw with the drug battle. I think in the minds of many taxpayers in this country, it became sort of a mindless debate in Congress——

Dr. REDLENER. Absolutely.

Senator DODD [continuing]. About who was going to put more money into the problem, without thinking really about what the priorities ought to be.

Dr. REDLENER. The big picture, yes.

Senator DODD. I am just nervous that we will get around to this issue—and it has been an issue, thank God, where people are interested; we have crossed that threshold—but it becomes dangerous here when all of a sudden it becomes a contest of who can write a bigger check, and we're not really thinking about where it is going to go and how it is going to work most effectively.

You had some comments down here, Mr. Johnson. I thought the "LMNOP" comment might have provoked something out of you, Broderick.

Dr. BOXHILL. I meant it respectfully.

Mr. JOHNSON. Yes, you meant it respectfully.

Ms. FREIDMUTTER. Senator Dodd, I'd just like to respectfully disagree with Dr. Boxhill. I think that housing obviously is critical. But not all the families who are homeless are going to be able to get back on their feet with housing alone. Just the sheer length of time some families have been homeless, and some of the problems that led to their becoming homeless, including drug addiction, including serious illness, including mental illness, leads you to have to give them something more.

When my grandmother came over from Europe in the early 1900s, they had settlement houses on the Lower East Side, and there were a lot of displaced people living in very poor conditions, often families who were separated, with one parent here, one parent someplace else. And when all those people were relocated, there were settlement houses that had multi services to provide for a variety of needs from tutoring, some health care, some social work.

When we built large public housing projects in the Fifties and Sixties, we had community centers that had daycare and health care clinics and sometimes schools, and we provided, not in separate, isolated locations where you had to take buses and wait on lines and come back 15 times, we provided very accessible services.

What I am suggesting is that in order to meet the housing needs of the homeless and the people who are at risk of becoming homeless, we are going to have to go through a massive rebuilding program. And in some cities, neighborhoods are being targeted to rebuild large amounts of housing. And if we simply move in families who have been homeless into those neighborhoods, we are going to create a little better, something better than a hotel or a shelter, but certainly nowhere near a normal neighborhood.

There needs to be a way to help families recreate the social structure that they have lost. One of the things I have learned as a local official—and it is a very hard thing to do—is that every professional, all the different mental health programs, drug programs, educational programs, and health care clinics, until recently all operated out of their little base, their building, and for being a poor person, you travelled a lot of places and waited on a lot of lines to try to get the most minimal care and minimal services.

One of the wonderful things about health care for the homeless activities around the country is that it brought together a lot of different professionals and sent them out to where people live. Right now, they are going out to where people live temporarily, but what I was suggesting in my report and what the Robert Wood Johnson Foundation and HUD want to try to experiment with is trying to create that environment in or near permanent housing.

A community center that exists now—I'll give you an example in New York City. We have a transitional residence in Harlem—a very nice place as shelters go in our city—where there is daycare, and there are social services, and they try to give help in apartment finding and employment training. We found a building for permanent housing about two blocks from the site, and the housing agency that runs that shelter is going to run the permanent housing, and they are going to place 20 families from their shelter into the permanent housing.

We are going to use that transitional housing site, the community center part of it where the daycare center and the other services are, as a stabilizing force for those families, so that if there is a problem, they can go back, so that the kids who are in daycare don't have to abruptly leave.

We are trying to look at an after-school program in a local school to see if they will particularly target our children to make sure that any problems that arise, we can deal with them.

More money is definitely needed, no question. But there are also lots of different services, and you have got to get people to come to the table and break down the barriers and work on the agenda of the child, not the health need of the child or the educational need, but the child whatever he needs.

Senator DODD. Jean, did you want to comment on this?

Dr. CIBOROWSKI. I just wanted to agree with that, because we have been able to follow some families from the motel to their permanent homes, and we have seen quite clearly that many new problems have emerged as a result of this transition. Abusive fathers have come back into the scene; in Boston particularly, a mom who moved back to a Boston neighborhood had to go through 11 different steps to get her kids enrolled in the Boston public schools. She was clearly not able to do this on her own, so she needed a lot of support and help during this period. And many of our families are in a very dangerous position of being homeless again because they are making some of the same mistakes and they are making some of the same poor judgment calls.

So I think the concept of enriched housing where these families can have built-in support structures is very important in addition to the permanent housing.

Senator DODD. Yes, Broderick.

Mr. JOHNSON. Senator, it is certainly the case that money is not the simple solution to all this. I don't know if you know the dollars that are spent, for example, at the Capital City Inn. It is something like $50 per night per room, which comes out to a couple million dollars a year that is spent.

But then when you go over there, your first reaction is: What in the world is the money being spent on? And then you see the Mercedes of the people who own the facility outside, and you realize that it is making someone rich, but that it is not improving the lives of children.

I get extremely frustrated and hurt to look at black children especially being treated this way and being allowed to exist in a situation like that. There are a lot of studies that are done about the low self-esteem levels of black children, some that were the focus of the documentary on ABC where black children are identifying with white dolls and white figures—and those are black children who were living in public housing projects and even middle-class black children. Unfortunately, it is a problem with my own son sometimes. But what about homeless children?

I know we have little black boys in our program who for some reason will not accept a black male tutor. So we know that there are some real self-esteem problems that are going on there. What is going to happen to him as he gets older, and how unproductive is he going to become? These children are going to be wasted unless this Nation regards them as its own. I think there is a real identification problem. To the extent that we would not treat our own children that way, we should not allow anybody else's child to be treated that way and to live that way. It is a terrible national tragedy.

Senator DODD. You mentioned earlier—and I apologize—when I introduced you to come to the table, I had in my notes here that you would be bringing some children along with you, and I am sorry that did not occur—and you indicated there were some special reasons why that did not occur. Maybe you'd like to share them with us now.

Ms. DUBROW. Yes. I asked a couple of people about this. Eight-year-old Damilla responded, when I asked her if she would be willing to talk to some people about what she feels like living at the Capital City Inn, and her first response was: Are there going to be cameras there? She wanted nothing to do with anything that identified her as homeless.

Another indication of this is when we were first beginning our tutorial project, there was an article in one of the D.C. Bar publications, and there was a picture of a little girl named Shirtsy with her tutor. I thought any child would love to see her face in a magazine, and I went up to her and said, "Shirtsy, your picture is going to be in the paper." Her immediate response was: "Does it say I am homeless?"

Sixteen year-old Cortez was asked to come today. He did not want to come here to talk about it because he doesn't want to be chided by his peers because he is homeless.

It is something they would rather not talk about. So that is why we didn't bring anyone.

Senator DODD. I understand that entirely, and I appreciate your trying. As I have said, I have a reluctance about doing this sometimes, and I'll be very blunt about why we do it, because frankly, if just you folks show up, they don't show up, the press. And if they don't show up, I maybe get a few colleagues who get interested, but it doesn't make it. But frankly, because Bernice is here, and because Calvin and Charlene were here, and Lorin, it is human; it is a story. And then you can get people to focus some attention on this. But if it is numbers and data and statistics, unfortunately, the painful lesson in this business is you can't get people to focus some attention on it. I suppose we have all learned that. I don't know how many more people learned about the Holocaust because of *The Diary of Anne Frank*, not because of the documentaries on PBS. I presume more people became aware of what happened in the 19th century in the 20th century on slavery, not because they read books about it but because of *Roots*, the movie made for television a few years ago.

So, you know, it needs to be identified. When 1,000 people get lost in a flood, it is on page B-12; one little child caught in a well, and that is on page 1.

So I apologize for even making the request in some ways, but it is a way in which we can get people to focus attention on it. It is a story. It is about a person. And unfortunately, I guess we are more moved by stories like that than the data of the 450,000—as Hitler said, when one person dies it is a tragedy, and if 1,000 die, it is a statistic. In a sense, that is what happens here; we get caught up in the statistics. So I understand, and I am glad you shared why they didn't come down, but that is the reason for it.

Mr. JOHNSON. Could I just show this? This is the logo for Project Northstar. Two girls—Damilla, who was mentioned, and who we asked to be here, and her sister—designed this logo. They are 8 and 6 years old. It has been dressed up just a little bit, but this was their notion of what Project Northstar's logo should look like and what it meant to them. So there is tremendous talent here.

Senator DODD. And they are happy faces, too.

Mr. JOHNSON. Yes, they are happy faces. As a matter of fact, one of the drawings that one of the children did—I don't know if you took note of this one—but one of the little girls did a drawing that was "Now versus later" thing—they do it in the diet ads all the time. On the left-hand side where it said "Now" and she still lives in a shelter, there are 20 stick figures with no faces who are crowded together, and there is a small room at the bottom. And then on the other side of it, which is when there is a home, there is a house with windows and flowers around it and a family, six in a row, a complete family of mother, father and children, and there are smiles on those faces. I think that is a dramatic illustration of how she feels about herself now and how she wants to feel about her life when she is out of the shelter.

Senator DODD. That is this drawing here——

Mr. JOHNSON. Yes.

Senator DODD [continuing]. And it is addressed to "Dear President Bush". We'll try and get these in the record. I think they are very, very telling.

We may have some additional questions, and other members of the committee may have some additional ones for you. We are going to be getting back in touch with you because we'd like to follow up as we get ready for next year. I think it is the only intelligent way to proceed on this issue, and I think it was helpful to get a little dynamic, because clearly there is a need for the housing. I think that is important. But my tendency is to agree, Cindy, more with you on the point that the housing becomes an important question, and four walls and a roof are important for people, but if you don't deal with these other factors that brought people there, I am afraid we are back where we started from in some cases.

Again, Mr. Johnson and Ms. Dubrow, I congratulate you on what you are doing. I am delighted to see that there are people who are volunteering and taking time, particularly from these high-powered law firms that you work for and all the money you make which we complain about all the time.

And for those of you who have come some distance, we thank you for being here.

The children, again, we thank you, Charlene and Bernice and Calvin. We thank you for coming today as well.

This Subcommittee on Children, Family, Drugs and Alcoholism will stand adjourned until further call of the chair.

[Whereupon, at 3:45 p.m., the subcommittee was adjourned.]

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